232450

(Requestor's Name)					
(Address)					
(Address)					
(Cit	y/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificate:	Certificates of Status			
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RARD CAS

JUN 21 2016: I ALBRITTON:

☞ COVER LETTER

.2,

TO: Amen- Divisi	dment Section on of Corporations				
SUBJECT:_	NORTHWESTERN MEAT, INC. Name of Co	orporation			
DOCUMENT	TNUMBER: 232650				
	Statement of Change of Registered Office	e/Agent and fee are submitted for filing.			
Please return a	all correspondence concerning this matter	to the following:			
	OLGA M. NUNEZ Name of Cor	ntact Person			
	NORTHWESTERN MEAT, INC.				
	Firm/Co	mpany			
	2100 NW 23RD STREET				
	Add	ress			
	MIAMI, FL. 33142				
	City/State ar	nd Zip Code			
	TBARRABI NUMEAT. COM				
	E-mail address: (to be used for future annual report notification)				
	`	,			
For further int	formation concerning this matter, please	call:			
OLGA M NUI		at (305) 633-8112			
	Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a	\$35.00 check made payable to the Depart	tment of State.			
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 8, 2016

OLGA M. NUNEZ NORTHWESTERN MEAT, INC. 2100 NW 23RD STREET MIAMI, FL 33142

SUBJECT: NORTHWESTERN MEAT, INC.

Ref. Number: 232650

We have received your document for NORTHWESTERN MEAT, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 416A00012118



STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	nge is submitted for a corporation	7.0502, 607.1508, or 617.1508, Fl organized under the laws of the Sto registered agent, or both, in the Sto	ate of		
1. The name of the	ne corporation: NORTHWESTERN	MEAT, INC.	·		
	office address: 2100 NW 23RD				
3. The mailing ac	ddress (if different):				
4. Date of incorp	oration/qualification: 01/28/19	60 Document number:	232650		
	street address of the current registement of State: (If resigned, enter re	ered agent and registered office on esigned)	file with the		
	TANEN, JEFFREY S				
	4000 PONCE DE LEON BLVD #570				
	CORAL GABLES, FL. 33146	i			
6. The name and street address of the new registered agent (if changed) and /or registered offices (if changed): OLGA M NUNEZ 2100 NW 23RD STREET P.O. Box NOT acceptable					
	OLGA M NUNEZ		— 1887. 70 m		
	P.O. Box NOT acceptable				
	MIAMI, FL. 33142	ox NOT acceptante	ORNO TAR		
The street addre	ss of its registered office and the sbe identical.	street address of the business offic	e of its registered agent,		
Such change wa authorized by th	s authorized by resolution duly ad e board, or the corporation has be	dopted by its board of directors or een notified in writing of the chang	by an officer so		
Of grantur	e of arrotheer granector	OLGA M NUNEZ PRE	SIDENT te and title		
I further agree to performance of agent. Or, if thi	o comply with the provisions of al my duties, and I am familiar with	ent and agree to act in this capaci ll statutes relative to the proper a and accept the obligation of my p to reflect a change in the registere ified in writing of this change.	id complete osition as registered		
Oly	Wun/	06/13/16	·		
O Sign	nature of Register Agent	Date			
ir signing on bei	nalf of an entity:				
Ty	ped or Printed Name				

* * * FILING FEE: \$35.00 * * *