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To:

Division of Corporations

Fax Number : (850)617-6360

From:

Account Name : UNITED CORPORATE SERVICES, INC.

Account Number : I20140000108 Phone

: (914)949-9188

Fax Number

: (914)949-9618

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## REGISTERED AGENT CHANGE SAVINO DEL BENE U.S.A., INC.

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TO:

## **COVER LETTER**

Name of Corporation

Division of Corporations

SUBJECT: SAVINO DEL BENE U.S.A., INC.

F0300001267

Amendment Section

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

## Dolores Burton Name of Contact Person

United Corporate Services, Inc.

Firm/Company

100 State Street, Suite 800

Address

Albany, NY 12207

City/State and Zip Code

lisa alongi @savinodelbene.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:	
at	()
Name of Contact Person	Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department 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

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

Statement of change is submitted for a corporation organized under the laws of the State of	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: SAVINO DEL BENE U.S.A., INC.	
2. The principal office address: 34 Englehard Ave, Avenel, NJ 07001	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 03/12/2003 Document number: F03000001267	·
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, onter resigned)	
Tersita Navarro	
11825 NW 100 Rouad, Suite 1 & 3	۰ م م
Miami FL 33178	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	J AN IO: IL
United Corporate Services, Inc.	۔ ہے۔
9200 South Dadeland Blvd-Suite 508	
P.O. Box NOT acceptable	
Miami, FL 33156	
The street address of its registered office and the street address of the business office of its registered a as changed will be identical.	gent,
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	
/s/ Raffaele Brazzini, CEO	
I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. I hereby confirm that the corporation has been notified in writing of this change.	 1
/s/ Michael A. Barr, President 9-30-2019	
Signature of Registered Agent Date	_
If signing on behalf of an entity:	
United Corporate Services, Inc.  Typed or Printed Name	
* * * FILING FEE; \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314