

FD400000344

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: TRANSPORTE MEDRANO INC  
Name of Corporation

DOCUMENT NUMBER: F04000000344

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:

EDWIN ARRIAGA

Name of Contact Person

TRANSPORTE MEDRANO INC

Firm/Company

68 SEWELL ST

Address

HEMPSTEAD, NY 11550

City/State and Zip Code

ACCOUNTING @ MEDRANOEXPRESS.COM

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

For further information concerning this matter, please call:

EDWIN ARRIAGA

Name of Contact Person

at ( 516 ) 620-0331

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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of NY in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: TRANSPORTE MEDRANO INC.
2. The principal office address: 111 NW 22ND AV  
MIAMI FL 33125
3. The mailing address (if different): 68 SEWELL ST  
HEMPSTEAD, NY 11550
4. Date of incorporation/qualification: JULY 1995 Document number: F04000000344
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

EDWIN VELASQUEZ  
111 NW 22ND AVE  
MIAMI, FL 33125

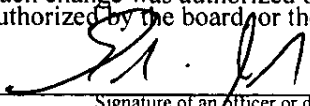
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

EDWIN MEDRANO  
111 NW 22ND AVE  
P.O. Box NOT acceptable  
MIAMI, FL 33125

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.

  
Signature of an officer or director

EDWIN ARRIAGA - CONTROLLER  
Printed or typed name and title

*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.*

  
Signature of Registered Agent

7/25/12  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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