

# L03000012099

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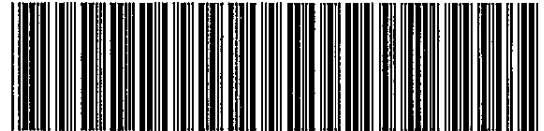
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FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

October 8, 2003

VARON & MENDOZA IMPORTERS & DISTRIBUTORS, LLC  
11786 ST. ANDREWS PLACE, #206  
WELLINGTON, FL 33414

SUBJECT: VARON & MENDOZA IMPORTERS & DISTRIBUTORS, LLC  
Ref. Number: L03000012099

We have received your document for VARON & MENDOZA IMPORTERS & DISTRIBUTORS, LLC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00.

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) 245-6913.

Diane Cushing  
Document Specialist

Letter Number: 603A00055157



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

November 3, 2003

VARON & MENDOZA IMPORTERS & DISTRIBUTORS, LLC  
11780 ST. ANDREWS PLACE, #206  
WELLINGTON, FL 33414

SUBJECT: VARON & MENDOZA IMPORTERS & DISTRIBUTORS, LLC  
Ref. Number: L03000012099

We have received your document for VARON & MENDOZA IMPORTERS & DISTRIBUTORS, LLC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00.

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Diane Cushing  
Document Specialist

Letter Number: 603A00055157

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the limited liability company is: VARON & MENDOZA IMPORTERS & DISTRIBUTORS, LLC.
2. The mailing address of the limited liability company is : 11780 St. Andrews Place # 206, Wellington, FL, 33414

3. April 03, 2003 Date of filing/registration in Florida
4. L 03000012099 Document number

5. The name of the registered agent and the registered office address as shown on the records the Florida Department of State:

FEDERICO A. DEMARCHI  
Name  
2133 POLO GARDENS DRIVE # 204  
Address  
WELLINGTON, FL, 33414  
City, State and Zip

6. The name and address of the new registered agent and/or office:

FEDERICO A. DEMARCHI  
Name  
11780 ST. ANDREWS PLACE # 206  
Address  
WELLINGTON, FL, 33414  
City, State and Zip

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

  
(Signature of a member or authorized representative of a member)

FEDERICO A. DEMARCHI (member)  
(Printed or typed name of signee)

*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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

  
(Signature of Registered Agent)

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**