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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) (Document Number) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officers CARAGORA CARAGORA CARAGORA (Address)						
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Office Use Only



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2012 MAY 24 AH 9: 43
SECRETARY OF STATE

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TO: Amendment Section

Division of Corporations

Dutch Food Company

Name of Corporation

DOCUMENT NUMBER: L'

L-06000023717

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:

Marcus Meurs

Name of Contact Person

Dutch Food Company

Firm/Company

765 Crandon Blvd. #603

Address

Key Biscayne, Florida 33149

City/State and Zip Code

marc.meurs@unifresh-group.com

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

For further information concerning this matter, please call:

Marcus Meurs

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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

STATEM	ENT OF CHANGE OF REGIS BOTH FO	R CORPORATIONS LLC	AGENI UK
Pursuant to the	provisions of sections 607.0502.	608.416. 617.0502, 607.1508, or 617.1508, Florida	Statutes, this
-		or organized under the laws of the State of	
=		or registered agent, or both, in the State of	
1. The name of	the corporation: Dutch Food	Company Ilc	
2. The principal	office address: 765 Crando	n Blvd. #603, Key Biscayne,	Florida 33149
·		,	
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 03/03/2	2006 Document number: L-060	00023717
	I street address of the current regi	istered agent and registered office on file v	vith the
	CFRA - resigned		
			2017 SEC
			SECRETARY CALLAHASSEE
			7 21 1AR 1ASS
6. The name and (if changed):	l street address of the new registe	ered agent (if changed) and /or registered of	
	Marcus Meurs		9: 4: ORIDI
	765 Crandon Blvd. #603, ł	Key Biscayne, Florida 33149	TE A
	P.O.	Box NOT acceptable	-
		1	
The street address changed will	ess of its registered office and the be identical.	e street address of the business office of	its registered agent,
Such change wa authorized by th	as authorized by resolution duly and hourd, or the corporation has been as a second corporation has been as a second corporation as a second corporation has been as a second corporation as a second	adopted by its board of directors or by ar been notified in writing of the change.	officer so
		Marcus Meurs , Manag	•
I hereby accept	the appointment as registered a	Printed or typed name and t gent and agree to act in this capacity.	•
I further agree : performance of	to comply with the provisions of my duties, and I am familiar wit	all statutes relative to the proper and co th and accept the obligation of my positio to reflect a change in the registered offi otified in writing of this change.	m ag regigtered
		May 22, 2012	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:	`	
·		_	
T	yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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