(Re	questor's Name)	***************************************
(Ad	dress)	
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(Cit	y/State/Zip/Phone	; #)
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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: 1's Worldwide Kitchen Support (Name of I	ply, LLC Limited Liability Company)		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning	this matter to the following:		
Jesus Velazquez			
(Name of Person)			
1's Worldwide Kitchen Supply, LLC			
(Firm/Company)			
P. O. Box 398371			
(Address)			
Miami Beach, Fl 33239			
(City/State and Zip Code)			
For further information concerning this matt	er, please call:		
Jesus Velazquez	at (305) 915-8043		
(Name of Person)	(Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations		
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following	ag amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy		

INHS18 (8/05)

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: 1's Worldwide	Kitchen Supply, LLC		 •
2. The mailing address of	the limited liability	company is : P.	O. Box 398371		
Miami Beach, Fl 33239					
April 30, 2007		1	L07000045388		
3. Date of filing/registration in Florida 4. Docu		Document num	ber		
5. The name of the register Florida Department of S		egistered office a	ddress as shown or	n the records of the	
•	Joseph A. Angris	sani, JR			
	1311 SW BRIARV	 			
•	M	Address			0
Miami Beach, FL 33239 City, State and Zip		07	SE		
6. The name and address of the new registered agent and/or office:			07 MAY -	CRET/	
	lesus Velazquez			9-	
-	1072 A CONTAINE	Name		PH	골라는
	8873-A FONTAINE Florida street add		······	-a-mas	35 25 25
	riorida sirect add.	1035 (1 .O. DOX 14	Or acceptable)	35 5	3
<u> </u>	MAMI	FL 33172			T.
	City	y, State and Zip			
If the limited liability comp confirmed that after the cha and the business office of t liability company, it is here of the members of the limit or the operating agreement (Signature of a member or authorize	ange or changes are the registered agent by confirmed that ted liability compared the limited liab	re made, the Flori t will be identical the change(s) was any or as otherwill the company.	da street address o Or, in the case of th	of the registered off of a Florida limited by an affirmative	vote
SCOTT L. SCHNEIDERME (Printed or typed name of signee)	SSER	······································			
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm to	atment as registere of all statutes rela accept the obligat is document is bei that the limited liab	d agent and agre ative to the prope tions of my positi ng filed to merely bility company ha	e to act in this cap and complete con on as registered as reflect a change as been notified in	acity. I further ag rformance of my di gent as provided fo in the registered of writing of this chai	ree to ities, r in fice ige.
(Signature of Registered Agent)	/)				

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00