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To:

Division of Corporations

Fax Number : (850)517-6383

From:

Account name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone : (561)694-8107

Fax Number : (561)694-1639

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one office and the second s

Email Address:_

LLC REGISTERED AGENT CHANGE QUIRCH FOODS CARIBBEAN, LLC

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

Nai	ne of the limited liability company: QUIRCH FOODS CARIBBEAN, LLC			
(a) _		(b)	Mailing address of limited liability company:	
`	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	2701 S LEJEUNE RD 12TH FL	PO B	PO BOX 144120	
	CORAL GABLES, FL 33134	CORA	AL GABLES, FL 33134	
	01/13/2004	L1800	0286668	
	Date of filing/registration in Florida	4.	Document number	
(a)	SABATER, CARMEN M			
	Registered Agent and Registered Office shown on the records	of the Florida Dept. of	State:	
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	_ _	
	2701 S LEJUENE RD 12TH FL			
	CORAL GABLES	_{FL} 33134	2019 AUG	
	Corporate Creations Network Inc. Enter name of NEW Registered Agent and/or NEW Register	ed Office address:	- FILED	
	NEW Registered Office Address:		· · · · · · · · · · · · · · · · · · ·	
	11380 Prosperity Farms Road #221E		7	
	Palm Beach Gardens	_{FL} 33410		
ne cha gent v vas/we ne arti Signa	imited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member cles of organization or the operating agreement of the property of a member of a member or authorized representative of a member of a dil statutes relative to the proper and completing of my position as registered agent as proving reflect a change in the registered office address.	of the registered of liability company, sof the limited liab he limited liability Lauren Ur	ffice and the business office of the register, it is hereby confirmed that the change(s) bility company or as otherwise provided in company. Inderwood, Attorney-in-Fact Printed or typed name of signee	