| (Address) | 500219090025 | | |
|---|---|--|--|
| (City/State/Zip/Phone #) | 01723712=01054=003 **35.00 | | |
| PICK-UP WAIT MAIL | | | |
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| TO: | Amendment Section Division of Corporation | ons | | | | |
|-----------------------|--|--|--|--|--|--|
| SUBJI | ECT: | Hops Interna | tional, Inc | | | |
| DOCU | UMENT NUMBER: | | L64537 | | | |
| The en | closed Statement of Cha | ange of Registered Offic | ce/Agent and fee are s | ubmitted for filing. | | |
| Please | return all correspondence | ce concerning this matte | er to the following: | | | |
| | | KEVIN I. SCH | WARTZ, ESQ. | | | |
| | | Name of Co | maet i cison | | | |
| EDMOND L. SUGAR, P.A. | | | | | | |
| | | Firm/C | ompany | | | |
| | | 57//1 QUEDII | DAN STREET | | | |
| | | | iress | | | |
| | | | | | | |
| | | HOLLYWOOD, | FLORIDA 33021 | ···· | | |
| | | City/State a | nd Zip Code | • | | |
| | KISLAW@aol.com | | | | | |
| | E-mail add | dress: (to be used for | future annual report | notification) | | |
| For fur | ther information concern | ning this matter, please | call: | | | |
| | Kevin I. Schw | artz, Esq. | at (954) | 925-3700 x 2 | | |
| | Name of Conta | ct Person | Area Code & | 925-3700 x 2 Daytime Telephone Number | | |
| Enclos | ed is a \$35.00 check ma | de payable to the Depai | rtment of State. | | | |
| | Amen Divisi P.O. I | dment Section ion of Corporations Box 6327 nassee, FL 32314 | Division of Clifton Books 2661 Execution 2661 Execu | ent Section of Corporations | | |

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of ch | ange is submitted for a co | orporation organize | 607.1508, or 617.1508, Flor d under the laws of the State d agent, or both, in the State | of Florida | |
|--|---|---|--|--|----|
| 1. The name of | the corporation: Hops | International, | | | |
| 3. The mailing | address (if different): | | | | |
| 4. Date of incom | poration/qualification: | 04/06/1990 | Document number: | L64537 | |
| | d street address of the cur urtment of State: (If resign | | at and registered office on fil | e with the | |
| | AMPARO KHAN | | | | |
| | 15105 NW 77TH A | VENUE | | | |
| | MIAMI LAKES FL | 33014 US | | | |
| 6. The name an (if changed): | | w registered agent (i | f changed) and /or registered | 7 | |
| | KEVIN I. SCHWAF | RTZ, ESQ. | | 2012 JAN 23 SECRETARY ALLAHASSEE | |
| | 5741 SHERIDAN S | P.O. Box NOT acc | | JAN HAS | 44 |
| | HOLLYWOOD, FL | | | જે જ | |
| as changed will | ess of its registered office be identical. | e and the street add | ress of the business office its board of directors or bed in writing of the change | of its registered agent. | 7 |
| | ure of an officer or director | | Simes KOH | Reshit | |
| I hereby accept I further agree of my duties, ar | t the appointment as regi to comply with the provi nd I am familiar with an | istered agent and a sions of all statutes I accept the obligat I a change in the re t of this change. | gree to act in this capacity, s relative to the proper and tion of my position as regis gistered office address, I h | complete performance tered agent. Or, if this ereby confirm that the | |
| | | | 1/19/12 | • | |
| _ | mature of Registered Agent | * ************************************* | Date | | |
| it signing on be | ehalf of an entity: | 7 1CKG | | | |
| KEU'N | yped or Printed Name | 2, ESQ | | | |

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)