

P00000031291

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

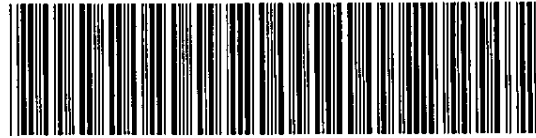
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
MAIL ADMINISTRATION

APPROVED
AND
FILED

C. LEWIS
JAN 22 2014
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 20, 2013

NABIL KISHK / MECCA INSTITUTION FOR DISTRIBUTION CO
4791 GULFSTREAM RD
LAKE WORTH, FL 33461 US

SUBJECT: MECCA INSTITUTION FOR DISTRIBUTION COMPANY
Ref. Number: P00000031291

We have received your document for MECCA INSTITUTION FOR DISTRIBUTION COMPANY and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

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) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 513A00028930

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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12/19/13
01006006

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Mecca Institution for distribution company
Name of Corporation

DOCUMENT NUMBER: P00000031291

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:

Nabil Kishk
Name of Contact Person

Mecca Institution for Distribution company
Firm/Company

4791 Gulfstream Rd
Address

Lake Worth, FL 33461
City/State and Zip Code

NABILKISHK@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nabil Kishk at (954) 554-8525
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

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Mecca Institution For Distribution Company
2. The principal office address: 4791 Gulfstream Rd
Lake Worth, FL 33461
3. The mailing address (if different): P.O. Box: 6467
Lake Worth, FL 33466
4. Date of incorporation/qualification: 03/27/2000 Document number: P00000031291
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Nabil Kishk
2465 Mercer Ave suite #207
in West Palm Beach, FL 33401

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Nabil Kishk
4791 Gulfstream Rd
Lake Worth, FL 33461

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Nabil Kishk
Signature of an officer or director

NABIL KISHK Manager
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Nabil Kishk
Signature of Registered Agent

01/08/14
Date

If signing on behalf of an entity:

NABIL KISHK
Mecca Institution For Distribution Company
Typed or Printed Name

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

APPROVED
AND
FILED

14 JAN 14 PM 1:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA