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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6380

From:
Account Name : AGENTS AND CORPORATIONS, INC
Account Number : I20010000112
Phone : (302)575-0875
Fax Number : (302)575-0925

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2009 MAR -4 PM 3:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

CAVUROTTO USA, INC.

RECEIVED
2009 MAR -4 AM 8:00
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3/4/09

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: CAVUROTTO USA, INC.
2. The principal office address: 1102 LINCOLN ROAD
   MIAMI BEACH, FL 33139
3. The mailing address (if different): P.O. BOX 402784
   MIAMI BEACH, FL 33140
4. Date of incorporation/qualification: 2/01/2002 Document number: P02000012084
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)

   Luis Lucas Fernandez
   366 Minorca Avenue
   Coral Gables, FL 33134-4304

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

   Agents and Corporations, Inc.
   300 First Avenue South, Suite 101-330
   (P.O. Box NOT acceptable)
   Naples, FL 34102

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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.

(Signature of an officer or director) NADIA KURKOU ST
(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.

(Signature of Registered Agent) 3/4/09
(Date)

If signing on behalf of an entity:

David N. Williams, President
(Typed or Printed Name)

* * * 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 (3/05)