## P02000059474

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## TRANSMITTAL LETTER

Division of Corporations **SUBJECT:** P0200005947 DOCUMENT NUMBER: 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: ZENAINA ROBLES
(Name of person) BEACH CHICKEN:
(Name of firm/company) 710 WASHINGTON AVE # CU-3. MIAMI BEACH, FL 33139.

(City/state and zip code) For further information concerning this matter, please call: (Name of person) at (786) 276-5818.

(Area code & daytime telephone number) Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: **Street Address:** Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 409 E. Gaines Street

Tallahassee, FL 32399

Tallahassee, FL 32314

Amendment Section

TO:

## 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.  In the name of the corporation:  BEACH CHCKEN INC.		
2. The principal office address: 710 WASHINGTON AVE- # CU-3		
MIAMI BEACH, FL 33139.		
3. The mailing address (if different): 50145		
4. Date of incorporation/qualification: 5-29-02 Document number: P02000053474		
<ul> <li>4. Date of incorporation/qualification: 5-29-02 Document number: P0200053477</li> <li>5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:</li> </ul>		
M. Gabriela Escalona.		
MOID LONDX AVE. # 311		
Mami Beach, Fl 33139.		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  ZENAIDA ROBLES		
(P.O. Box or personal mailbox NOT acceptable)		
MIAMI BEACH, FL 33139		
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, chairman or vice chairman of the board)  X 7 ENAIDA ROBLES, PRESIDENT		
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)  (G-1Le-03). (Date)		
If signing on behalf of an entity:		
(Typed or Printed Name) (Capacity)		
* * * FILING FEE: \$35.00 * * *		
MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314		