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COVER LETTER

TO: Amendment Section **Division of Corporations**

VECINOS CAFE, CORP

Name of Corporation

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:

ISAAC PUERTA

Name of Contact Person

VECINOS CAFE, CORP

Firm/Company

5600 COLLINS AVENUE

MIAMI BEACH, FL., 33140

City/State and Zip Code

ISAACJUNIORUSA@YAHOO.ES

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ISAAC PUERTA

Name of Contact Person

305 867-8282
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

statement of ch	ange is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes, to n organized under the laws of the State of FLORIDA r registered agent, or both, in the State of Florida.	
1. The name of	the corporation: VECINOS C	AFE, CORP	
2. The principal	l office address: 5600 COLLIN	NS AVENUE, MIAMI BEACH, FL., 331	40
3. The mailing a	address (if different): 8251 NVV	8TH STREET APT 116, MIAMI, FL.,	33126
4. Date of incor	poration/qualification: 07/29/2	003	18
	d street address of the current regis	stered agent and registered office on file with the	
	ALBERTO GONZALEZ	(RESIGNED)	1550
	2899 COLLINS AVENU	E #1739	WISTON OF CO.
	MIAMI BEACH, FL., 33	140	- A 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
6. The name and (if changed):	d street address of the new register	red agent (if changed) and /or registered office	8:07
	ISAAC PUERTA	- Aller - Alle	
	VECINOS CAFE, CORE		
	5600 Collins Av	30x NOT acceptable 1/E., Miami Prach FL. 3	3140
The street addreas changed will		street address of the business office of its registere	
Such change wa authorized by th	as authorized by resolution duly a he board, or the corporation has b	dopted by its board of directors or by an officer so een notified in writing of the change.	
Signat	re of an officer or director	ISAAC PUERTA Printed or typed name and title	
I hereby accept I further agree of performance of agent. Or, if the hereby confirm	the appointment as registered ag to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been not	ent and agree to act in this capacity, all statutes relative to the proper and complete a and accept the obligation of my position as regist to reflect a change in the registered office address, tified in writing of this change.	cred . I
3	nature of Registered Agent	07/06/2016	
If signing on be	half of an entity:		
ISAAC PUE	ERTA		
	yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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