

P04 000012059

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

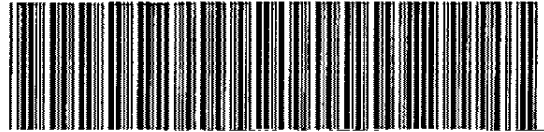
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400035109444

05/04/04--01039--020 \*\*35.00

FILED  
04 MAY -3 PM 3:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PO chg  
(000000)  
5/10

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Latin Products Grupo Max Corp  
(Name of corporation)

**DOCUMENT NUMBER:** P04000012059

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:

Federico Wolff  
(Name of person)

Latin Products Grupo Max Corp  
(Name of firm/company)

13374 NW 2nd Terrace  
(Address)

Miami, FL 33182  
(City/state and zip code)

For further information concerning this matter, please call:

José Rodríguez at (305) 5464811  
(Name of 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  
409 E. Gaines Street  
Tallahassee, FL 32399

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314