P64000101661

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Melk Goods, Corp

Name of Corporation

DOCUMENT NUMBER: P04000101661

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:

Leandro E Nobel

Name of Contact Person

Melk Goods, Corp

Firm/Company

12932 Ixora Rd

Address

North Miami - FL - 33181

City/State and Zip Code

leandro@melkgoods.com

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

For further information concerning this matter, please call:

Leandro Nobel

_.786 \942-2211

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, 61 statement of change is submitted for a corporation of the provision of the section of the	organized under the laws of the Sta	ate of Florida
in order to change its registered office or r		ite of Fiorida.
1. The name of the corporation: Melk Goods,	·	
2. The principal office address: 7354 NW 34	Ith St - Miami - FL - 331	22
3. The mailing address (if different): 12932 Ixo	ra Rd - North Miami - F	FL - 33181-2357
4. Date of incorporation/qualification: July/200	Document number: F	P04000101661
5. The name and street address of the current register Florida Department of State: (If resigned, enter re		file with the
12932 Ixora Rd - North	Miami - FL - 33181	
		
/		
6. The name and street address of the new registered	d agent (if changed) and /or registe	ered office
(if changed):		
		A C of
		ADLLAH!
PO Po	x NOT acceptable	
r.o. Bo.	k NO1 acceptable	
The street address of its registered office and the sas changed will be identical.	treet address of the business offic	e of its registered agent,
Such change was authorized by resolution duly adeauthorized by the board, or the corporation has been	opted by its board of directors or en notified in writing of the chang	by an officer so
	Leandro E Nobel - Pre	esident (Owner)
Signature of an officer or director	Printed or typed nam	e and title
I hereby accept the appointment as registered ages I further agree to comply with the provisions of all performance of my duties, and I am familiar with a agent. Or, if this document is being filed merely to hereby confirm that the corporation has been notif	nt and agree to act in this capacit ! statutes relative to the proper ar and accept the obligation of my po o reflect a change in the registere fied in writing of this change.	ty. id complete osition as registered d office address, l
1 WUWWY	11 / 05 / 2015	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
Typed 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 * * *