

P05000107472

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

REGISTERED AGENT CHANGE**LAREDO WESTERN WEAR, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
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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: LAREDO WESTERN WEAR, INC.
2. The principal office address: 7400 NW 7 STREET, UNIT 4, MIAMI, FLORIDA 33128
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 08/02/2005 Document number: P05000107472

5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

MARIA L. MADRIGAL

7400 NW 7 STREET, UNIT 4

MIAMI, FLORIDA 33128

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

GUSTAVO A. MADRIGAL

7400 NW 7 STREET, UNIT 4

(P.O. Box NOT acceptable)

MIAMI, FLORIDA 33128

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)

GUSTAVO A. MADRIGAL

(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)

(Date)

If signing on behalf of an entity:

GUSTAVO A. MADRIGAL

(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 (8/05)

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