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COVER LETTER

TO: Amer Divis	ndment Section ion of Corporations
SUBJECT:_	Savendonate, Inc. (Name of Corporation)
DOCUMENT	r NUMBER: P05000168127
	Statement of Change of Registered Office/Agent and fee are submitted for filing.
	all correspondence concerning this matter to the following:
	Deborah de Castro
	(Name of Contact Person)
	Savendonate, Inc. (Firm/Company)
	600 NE 36th Street, # 1816 (Address)
	Miami, FL 33137
For further in	(City/State and Zip Code) Formation concerning this matter, please call:
Deborah de (Castro at (305) 576-7001
	(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 Street Address: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0302, 617.030 inge is submitted for a corporation organ er to change its registered office or regist	tized under the laws of the State of Flori	ida
	the corporation: Savendonate, Inc.	rea agem, or boin, in the state of Proru	<i>au</i> .
	office address: 600 NE 36th Street, # 18	16	
Miami, FL	33137		
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 12/30/05	Document number: P050001681	127
	d street address of the current registered a rtment of State:	gent and registered office on file with the	e
	United States Corporation Agent	s, Inc.	
	1111 Lincoln Road, Suite 400		
	Miami Beach, FL 33139		
6. The name and (if changed):	d street address of the new registered ager Deborah de Castro	nt (if changed) and /or registered office	O7 APR SECRETATALLAHA
	600 NE 36th Street, # 1816		19 ARY.C
	(P.O. Box NOT acceptable)	THE E
	Miami, FL 33137		IZ: I
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its rep	gistered agent,
Such change we authorized by the	as authorized by resolution duly adopte he board, or the corporation has been no	d by its board of directors or by an offi orified in writing of the change.	icer so
	we of the officer of director)	Deborah de Castro - Treasurer (Printed or typed name and title)	
I hereby accept I further agree of my duties, an document is bei corporation has	t the appointment as registered agent an to comply with the provisions of all stat and I am familiar with and accept the obl ing filed merely to reflect a change in the s been notified in writing of this change	nd agree to act in this capacity. Lutes relative to the proper and complet ligation of my position as registered ag ne registered office address, I hereby co	te performance ent. Or, if this onfirm that the
	V= Listra	4 / 15 / 07	
, ,	gnapare of Registered Agent)	(Date)	
	chalf of an entity:		
Deborah de C	Castro Typed or Printed Name)		
•	* * * FILING FI	EE: \$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)