## 90000053798

Office Use Only



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10/14/11--01019-TALLAHASSEE.FLORID

10/17/11

## **COVER LETTER**

Division of Co	prporations			
CLID IF CT.	PD FOOD& RE	VERAGE INC		
SUBJECT: P.D. FOOD & BEVERAGE, INC.  Name of Corporation				
DOCUMENT NUMB	ER:P0	60000527.98		
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:				
		<u>.</u>		
April I. Halle  Name of Contact Person				
Name of Contact Person				
The Halle Law Firm, P.A. Firm/Company				
rimi/Company				
2404 North Fordayal Highway Cuita 404				
3101 North Federal Highway, Suite 401 Address				
Fort Lauderdale, Florida 33306				
Fort Lauderdale, Florida 33306 City/State and Zip Code				
ahatta @hattalaysfirma				
ahalle@hallelawfirm.com  E-mail address: (to be used for future annual report notification)				
	•	•		
For further information concerning this matter, please call:				
A	pril I. Halle	at ( 954 ) 537-0466 Area Code & Daytime Telephone Number		
Name o	T Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.				
	Mailing Address:	Street Address:		
	Amendment Section	Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	Clifton Building		
•	Tallahassee, FL 32314	2661 Executive Center Circle		
		Tallahassee, FL 32301		

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

	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flo ange is submitted for a corporation organized under the laws of the Stat		
In ord	ler to change its registered office or registered agent, or both, in the Stat	e of Florida.	
1. The name of	f the corporation: P.D. FOOD & BEVERAGE, INC.		
2. The principa	office address: 3425 North Federal Highway, Fort Lauderda	le, Florida 33306	
3. The mailing	address (if different):		
4. Date of incom	rporation/qualification: April 12, 2006 Document number:	P06000052798	
5. The name an Florida Depa	nd street address of the current registered agent and registered office on fa artment of State: (If resigned, enter resigned)	le with the	
	Rick Rodriguez		
	497 N.W. 31st Avenue	,	
	Pompano Beach, Florida 33069		
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registere	SECRETARY OF STATE	
	Joel Marcus	SSA F T	
	676 West Prospect Road	Fig. 3	
	P.O. Box NOT acceptable		
	Fort Lauderdale, Florida 33309		
The street address changed will	ess of its registered office and the street address of the business office be identical.	of its registered agent,	
Such change w authorized by t	as authorized by resolution duly adopted by its board of directors or be board, or the corporation has been notified in writing of the change	oy an officer so	
4 Laird Boles			
	the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and I am familiar with and accept the obligation of my position as regising filed merely to reflect a change in the registered office address, I is been notified in writing of this change.		
4 Lan	mature of Registered Agent Date	/	
-	chalf of an entity:		
Ty	Joel Marcus  yped 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)