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SECRETARY OF STATE
AND ASSEE, FLORIDA

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: PPS Vending Inc. (Name of Corporation)
DOCUMENT NUMBER: <u>P06000/00565</u>
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:
Paola Lamelas (Name of Contact Person)
PPS Vending Inc. (Firm/Company)
13265 SW 128th Passage. (Address)
Miami, Florida 33186 (City/State and Zip Code)
For further information concerning this matter, please call:
Paola Lamelas at (786) 266-1521 (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

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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

statement of change is submitted for a corporation organized under the laws of the State ofin order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: PPS Vending Inc.
2. The principal office address: 13265 SW 128th Passage  Miami, Florida 33186
3. The mailing address (if different):
4. Date of incorporation/qualification: 8/1/2006 Document number: POG000100565
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Peter Lamelas 13265 SW 128th Passage
Miami, FL 33/86
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Paola Lamelas  8. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
(P.O. Box NOT acceptable)
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)  Peter Lamelas (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 positived in writing of this change.
(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

\* \* \* FILING FEE: \$35.00 \* \* \*