P06000116152

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
•			
(Document Number)			
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

RA. Charge MAY 1 5 2007

TO:

Amendment Section

COVER LETTER

Division of Corporations			
SUBJECT: LATINOS CAFETERIA CORP			
(Name of Corporation)			
DOCUMENT NUMBER: P06000116152			
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:			
ERIC: CASTILLO			
(Name of Contact Person)			
<u> </u>			
(Firm/Company)			
19 Dogwood Place			
(Address)			
Ocala, Florida 34472			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
ERIC CASTILLO at (352) 687-1577 (Name of Contact Person) (Area Code & Daytime Telephone Number			
(Name of 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
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

statement of change is submitted	tions 607.0502, 617.0502, 607.1508, or 617.1508, for a corporation organized under the laws of the c egistered office or registered agent, or both, in the S	State of Florida
The name of the corporation:_	LATINOS CAFETERIA CORP	
2. The principal office address:_	16320 S.E. Hwy. 40	
****	Ocala, FL. 34488	
3. The mailing address (if different	nt):	
4. Date of incorporation/qualification	ntion: September 8,2008 ocument number:	P06000116152
5. The name and street address o Florida Department of State:	f the current registered agent and registered office of	n file with the
	Daymi Gonzalez	<u>-</u>
	16320 S.E. Hwy 40	
	Silver Spring Florida 34488	07 P
6. The name and street address of (if changed):	the new registered agent (if changed) and /or regis	SSE SSE
	Eric. Castillo	
<u></u>	19 Dogwood Place	8: 4 STATI LORII
	(P.O. Box NOT acceptable) Ocala, Florida 34472	DA .
The street address of its register as changed will be identical.	ed office and the street address of the business of	fice of its registered agent,
Such change was authorized by authorized by the board, or the	resolution duly adopted by its board of directors corporation has been notified in writing of the cha	or by an officer so ange.
Signature of an officer or dire	Daymi Gonzale: (Printed or typed	Z name and title)
I hereby accept the appointment I further agree to comply with the of my duties, and I am familiar of document is light filed merely to corporation has been notified in	as registered agent and agree to act in this capa te provisions of all statutes relative to the proper with and accept the obligation of my position as r o reflect a change in the registered office address writing of this change.	city. and complete performance egistered agent. Or, if this s, I hereby confirm that the
(Signarure of Registered A	May 2, 2007 (Date	,
Eric Castillo		, j
(Typed or Printed Name	<u> </u>	

* * * 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)

APPRUYE