## Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

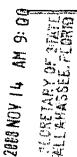
: (850)617-6380

: RITTER, RITTER & ZARETSKY Account Name

Account Number : I20010000015 Phone : (305)372-0933

Pax Number

: (305)372-0836



## REGISTERED AGENT CHANGE

MHV HORSES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

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November 13, 2008

FLORIDA DEPARTMENT OF STATE Division of Corporations

MHV HORSES, INC. 555 NE 15TH STREET 100 MIAMI, FL 33122

SUBJECT: MHV HORSES, INC.

REF: P06000151250

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell Regulatory Specialist II FAX Aud. #: H08000253409 Letter Number: 208A00057134

P.O BOX 6327 - Tallahassee, Florida 32314

P. 3

TO:	Amendment Section
	Division of Corporations

SUBJECT: MHV HORSES INC.
(Name of Corporation)

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:

(Name of Contact Person)

Attorney at Law
(Firm/Company)

355 NE 155t = +100

(Address)

MAM F(A 33/32

(City/State and Zip Code)

For further information concerning this matter, please call:

Tolan Ptter Esq at (305) 372-0933 (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
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

CR2E045 (8/05)

# 080002534093 H 080002564503 No. 14. 2008 11:23AM Home Abstract & Title Co. No. 4840 P.

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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 FLOR 17A in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: MHV HORSES, INC.
2. The principal office address: 4724 NE 1st AVE
MIAMI, FL 33/37
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 12/8/06 Document number: P 06000/5/050
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
John Rither
555 NE 15# Street # 100
Miami FL 33132
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Marcila Hurtado Vargas
4724 NE 1 St AVE  (P.O. Box NOT acceptable)
Miami, FL 33137
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.
MATCE (A HUTTADO VATO AS
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 carporation has been notified in writing of this change.
Manula Warys Nov. 5, 2008 (Date)
If signing on behalf of an entity:
MARCELA HUTALO Arga S (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

H 0.8 000 25 64503

CR2E045 (8/05)