

P07000001948

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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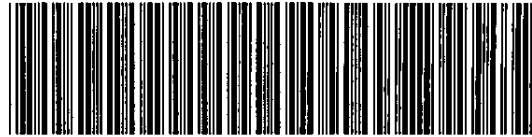
(Business Entity Name)

(Document Number)

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CLERK OF SUPERIOR COURT

10/28/16

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SUPER LATINA FOOD MART INC.
Name of Corporation

DOCUMENT NUMBER: P07000001948

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:

DORA ORTIZ
Name of Contact Person

SUPER LATINA FOOD MART
Firm/Company

2164 SANTA BARBARA BLVD.
Address

NAPLES, FLORIDA 34116
City/State and Zip Code

ortizdora37@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DORA ORTIZ at (239) 825-4097
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

**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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SUPER LATINA FOOD MART INC.
2. The principal office address: 216A SANTA BARBARA BLVD.
NAPLES, FLORIDA 34116
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1/1/07 Document number: PO7000001948

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)

DANIEL ANTONIO ORTIZ III (RESIGNED)
696 108TH AVE. N.
NAPLES, FLORIDA 34108

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CLERK OF STATE
TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

DORA MARICOL ORTIZ
696 108TH AVE. N.
NAPLES, FL. 34108

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.

Dora M. Ortiz
Signature of an officer or director

DORA M. ORTIZ PRESIDENT
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 notified in writing of this change.

Dora M. Ortiz
Signature of Registered Agent

10/20/16
Date

If signing on behalf of an entity:

Typed or Printed Name

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