## Po7000125407

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: S & S International Distributors I (Name of Corpo	nc. oration)
DOCUMENT NUMBER: P07000125407	
The enclosed Statement of Change of Registered Office/Ap	gent and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Ali Sou (Name of Contac	
(Firm/Comp	any)
6856 NW (Address	
Miami, Flor (City/State and Z	ida 33166 ip Code)
For further information concerning this matter, please call:	
Ali Souheil a (Name of Contact Person)	t ( 305 ) 591-9196 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department	nt 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, 617.050. statement of change is submitted for a corporation organ in order to change its registered office or registe	ized under the laws of the State of Florida	_
1. The name of the corporation: S & S International	Distributors, Inc.	
2. The principal office address: 6856 NW 77 CT		
Miami, Florida 33166		
3. The mailing address (if different): Same as Above	1	<del></del> -
4. Date of incorporation/qualification: 11/20/2007	Document number: <u>P07000125407</u>	
<ol><li>The name and street address of the current registered ap Florida Department of State: (If resigned, enter resigned)</li></ol>		
Robert Lithman	· · ·	
150 Alhambra Circle		
Coral Gables, Florida 33134		
6. The name and street address of the new registered agen (if changed):	nt (if changed) and /or registered office R	
Ali Souheil	24 ASS	A toware.
6856 NW 77 CT (P.O. Box NOT acceptable)	FF. F	
	4: 03	Samuel
Miami, Florida 33166  The street address of its registered office and the street as changed will be identical.	— m ← m	nt,
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been no	d by its board of directors or by an officer so officed in writing of the change.	
/- 2%.	Ali Souheil	
(Signature of an officer or director)  I hereby accept the appointment as registered agent an I further agree to comply with the provisions of all state of my duties, and I am familiar with and accept the oblacoument is being filed merely to reflect a change in the corporation has been notified in writing of this change.	(Printed or typed name and title) and agree to act in this capacity, tutes relative to the proper and complete performa ligation of my position as registered agent. Or, if it the registered office address, I hereby confirm that it	– nce this the
with hail	02/20/2009	
(Signature of Registered Agent)	(Date)	_
f signing on behalf of an entity:		
Ali Souheil (Typed or Printed Name)		

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