

P07000126276

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

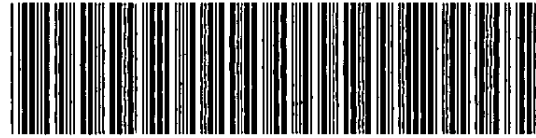
(Business Entity Name)

(Document Number)

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08 JUL 23 AM 8:43
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TALLAHASSEE, FLORIDA

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07/24/08

DC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 17, 2008

CAROLYN SPECHT
11900 BISCAYNE BLVD.
SUITE 610
MIAMI, FL 33181

SUBJECT: T4F USA INC.
Ref. Number: P07000126276

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The registered agent must sign accepting the designation.

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

Letter Number: 408A00041796

RECEIVED
2008 JUL 23 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: T4F USA INC.
(Name of Corporation)

DOCUMENT NUMBER: P07000126276

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:

CAROLYN SPECHT
(Name of Contact Person)

T4F USA INC.
(Firm/Company)

11900 BISCAYNE Blvd., Ste. 610
(Address)

MIAMI, FL 33181
(City/State and Zip Code)

For further information concerning this matter, please call:

Anne Robinson at (212) 586-0222
(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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: T4F USA INC.
2. The principal office address: 11900 BISCAYNE BLVD.
Suite 610, MIAMI, FL 33181
3. The mailing address (if different): _____

4. Date of incorporation/qualification: _____ Document number: 107000126276

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

NS CORPORATE SERVICES Inc.
1110 BRICKELL Ave. Suite 310
Miami, FL 33131

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

JOSE MUNIZ NETO
11900 BISCAYNE BLVD., Suite 610
(P.O. Box NOT acceptable)
Miami, FL 33181

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 JUL 23 AM 8:43

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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.

Ch. Specht

(Signature of an officer or director)

CAROLYN SPECHT V.P.

(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.

[Signature]

(Signature of Registered Agent)

7/9/08

(Date)

If signing on behalf of an entity:

JOSE MUNIZ NETO

(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