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Division of Corporations

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From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone: (561)694-8107

Fax Number : (561)694-1639

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MAY 3 0 2019

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REGISTERED AGENT CHANGE GOURMET PARISIEN, INC.

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha | nge is submitted for a corporation organ | 02, 607.1508, or 617.1508, Florida Statutes nized under the laws of the State of <u>Floride</u> tered agent, or both, in the State of Florida. | 1 | - |
|---|--|---|--|----------|
| | the corporation: GOURMET PAF | • | | |
| 2. The principal | | N ST, HOLLYWOOD, FL 33 | 020 | _ |
| 3. The mailing s | ddress (if different): PO BOX 331 | 007, BROOKLYN, NY 11233 | 3 | |
| 4. Date of incorp | poration/qualification: 01/22/2008 | Document number: P0800000 | 7783 | |
| 5. The name and Florida Depar | street address of the current registered a trnent of State: (If resigned, enter resigned | gent and registered office on file with the | | |
| | Gianese-Pittman, P.A. | | | |
| | 1943 SHERMAN STREET | , MIAMI, FL 33020 | SECRET | 2019 MAY |
| The name and (if changed); | street address of the new registered ages | nt (if changed) and /or registered office | 14.7.50 10.3.14 10.3.14 | 29 |
| | Corporate Creations Netwo | ork Inc. | The state of the s | 是9: |
| 11380 Prosperity Farms Road #221E | | 三型 | : 28 | |
| | Palm Beach Gardens, FL | | , , , | |
| | | address of the business office of its registe | | 15, |
| - 1 Signal | o of an officer of prectur | by its board of directors or by an officer stiffed in writing of the change. Jenisa Irizarry, Attorney-in- Printed or typed name and title | Fact | |
| I hereby accept I further agree to performance of agent. Or, if thi lereby confirm to | the appointment as registered agent and o comply with the provisions of all statu my duties, and I am familiar with and a s documontis being thed merely to refle hat the corporation has been notified in | d agree to act in this capacity. stes relative to the proper and complete ccept the obligation of my position as regi ect a change in the registered office addre n writing of this change. | stered ss, I | |
| Sign | Name of Regulation Agent | 5/29/2019 | | |
| \ | nalf of an entity: | Date | | |
| | tzarry, Special Secretary | | | |
| Ту | ped or Printed Name | | | |

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