

P090000012558

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

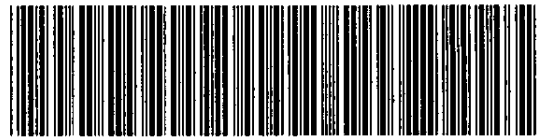
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TALLAHASSEE, FLORIDA

B.A.

TB

JUL 28 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Superior Seafood of USA, Corp.
Name of Corporation

DOCUMENT NUMBER: PO9000012558

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:

MORELA LUCAS
Name of Contact Person

Superior Seafood of USA, Corp.
Firm/Company

25 Van Hise Court
Address

EAST BRUNSWICK, NJ 08816
City/State and Zip Code

morela@superiorseafood.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Morela Lucas at ⁷³²~~732~~) 387-8089
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 14, 2009

MORELA LUCAS
SUPERIOR SEAFOOD OF USA, CORP
25 VAN HISE COURT
EAST BRUNSWICK, NJ 08816

SUBJECT: SUPERIOR SEAFOOD OF USA, CORP
Ref. Number: P09000012558

We have received your document for SUPERIOR SEAFOOD OF USA, CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 509A00024165

RECEIVED
2009 JUL 27 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: Superior Seafood of USA, Corp
2. The principal office address: 8113 NW 33rd Street, Miami, FL 33122
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2/10/2009 Document number: PO9000012558
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)

MORELA LUCAS
12472 SW 123 Street
MIAMI, FL 33186

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

MORELA LUCAS
8113 NW 33rd Street
MIAMI, FL 33122

P.O. Box NOT acceptable

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TALLAHASSEE, FLORIDA

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.

[Signature]
Signature of an officer or director

Morela Lucas, 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.

[Signature]
Signature of Registered Agent

7/20/09
Date

If signing on behalf of an entity:

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
CR2E045 (8/05)