## P09000068088

(Re	equestor's Name)				
(Ad	dress)				
(Ad	ldress)				
(Cit	ty/State/Zip/Phone	÷#)			
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
		i			

Office Use Only



100181253921

05/29/10--01029--025 \*\*35.00



R.A. Chorgo C.COULLIETTE

JUN 10 2010

**EXAMINER** 

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

	54 1 4 Et					
SUBJECT:	51 and 1 Enter	<b>prises, inc.</b> Corporation				
DOCUMENT NUMBER:	Tax ID	: 27-0711040				
The enclosed Statement of Cha	inge of Registered Offic	e/Agent and fee are submit	ted for filing.			
Please return all correspondence	ce concerning this matter	r to the following:				
	Gabriel 9	S. Garcia				
	Name of Co	ntact Person				
	51 and 1 En	tornrisos Inc				
	51 and 1 Enterprises, Inc. Firm/Company					
		. ,				
	110 NE 46th Street					
	Add	lress .				
			•			
	Miami, FL	33137-3424 nd Zip Code	<u>.</u>			
	City/State a	nd Zip Code				
	garcia@ir	nbox.com				
E-mail address: (to be used for future annual report notification)						
For further information concer	ning this matter, please	call:				
Gabriel S.	Garcia	at ( 305 )	586-4692			
Name of Conta	ct Person	at ( <u>305</u> ) Area Code & Dayti	me Telephone Number			
Enclosed is a \$35.00 check ma	ide payable to the Depar	rtment of State.				
<u>Maili</u>	ng Address:	Street Address:				
	ndment Section	Amendment Se Division of Co				
	sion of Corporations Box 6327	Clifton Buildin				
	hassee, FL 32314		e Center Circle			

Tallahassee, FL 32301



June 1, 2010

GABRIEL S. GARCIA 51 AND 1 ENTERPRISES, INC. 110 NE 46TH ST MIAMI, FL 33137-3424

SUBJECT: 51 AND 1 ENTERPRISES, INC.

Ref. Number: P09000068088

We have received your document for 51 AND 1 ENTERPRISES, INC. 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 document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 610A00013616



## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CGRPORATIONS

statement of cha	provisions of sections 60 ange is submitted for a co	orporation organized	d under the laws of the S	State of Florida		_
	er to change its registered the corporation: 51 an			tate of Florida.		
	office address: 110 NE		33, 111C.			
	33137-3424	. +0111 011001				
3. The mailing a	address (if different):					
4. Date of incor	poration/qualification:	8/11/2009	Document number:	P09000	0680	88
	d street address of the cur rtment of State: (If resign		t and registered office or	n file with the		
	resigned					
				····		
					<b>=</b>	
6. The name and (if changed):	d street address of the nev	w registered agent (i	f changed) and /or regist	tered office		ALL PARTY OF THE P
	Gabriel S. Garcia				10整	
	110 NE 46th Stree					
		P.O. Box NOT ac	ceptable	925	1 ==	
	Miami, FL 33137-3	424		`¥°	n	
The street addr	ess of its registered offic l be identical.	e and the street add	dress of the business of	fice of its regist	ered ag	ent,
Such change wauthorized by t	as authorized by resolut be board, or the corpora	ion duly adopted by tion has been notifi	y its board of directors of the character of the characte	or by an office ange.	· so	
Signati	tre of an object or director	w	Gabriel Printed or typed r	S. Garcia		<del></del>
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as reg to comply with the prov nd I am familiar with an ing filed merely to reflec s been notified in writin	istered agent and a isions of all statute d accept the obliga ct a change in the r g of this change.	gree to act in this capa s relative to the proper tion of my position as r egistered office address	city. and complete p egistered agen s, I hereby conf	performe !. Or, if irm that	ance this the
<u>6a</u>	hill le	$\int$	May 2	5, 2010		
	gnature of Registered Agent		Date			
It signing on be	ehalf of an entity:					
	Gabriel S. Garcia yped or Printed Name					
ı	yped or ranged Ivalie					

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