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COVER LETTER

то:	Amendment Division of	Section Corporations		•		
SUBJ	ECT:		RMACY CORI	<u> </u>		
DOC	UMENT NUN	1BER:F	209000093038			
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:						
			,			
		JOSE AN	ITONIO GARCIA	•		
	<u></u>	Name o	of Contact Person			
			ORATE CONSUL	_TANT		
		Fir	m/Company			
•	17976 NW 68 AVE Address					
			Address ,			
	MIAMI EL 2201E					
	MIAMI, FL 33015 City/State and Zip Code					
ja4taxes@aol.com E-mail address: (to be used for future annual report notification)						
E-mail address: (to be used for future annual report nonneation)						
For fu	ırther informat	ion concerning this matter, pl	ease call:			
		Jose Antonio	_{at (} 786	306 3529		
	Nam	e of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.						
		Mailing Address: Amendment Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314	Am ns Div Clif 266	et Address: endment Section ision of Corporations ton Building I Executive Center Circle ahassee, 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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: GALVEZ PHARMACY CORP
2. The principal office address: 137 SW 57TH AVE MIAMI, FLORIDA 33144
3. The mailing address (if different): SAME AS ABOVE
4. Date of incorporation/qualification: NOV/12/2009 Document number: P09000093038
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)
JOSE ANTONIO GARCIA
137 SW 57TH AVE
MIAMI, FL 33144
6. The name and street address of the new registered agent (if changed) and /or registered office AAA (if changed):
ENRIQUE GALVEZ
ENRIQUE GALVEZ 137 SW 57TH AVE P.O. Box. NOT acceptable
The box not acceptable
MIAMI, FL 33144
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 Enrique GALUEZ POTE
Signature of an officer or director 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.
11/18/209
Signature of Registered Agent Date
If signing on behalf of an exhity:
Type of Printed Name EURIGUE COALUEZ