P10006 006 TE

(Requestor's Name)
(Address)
(Address)
(1001033)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Cooline Name of the Cooline of the
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

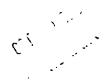




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CR2E045 (03/12)

TO:

Amendment Section Division of Corporations

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida.	<u>r_</u>
I. The name of t	the corporation: CHINA GOURMET, WC office address:	
3. The mailing a	ddress (if different):	,
4. Date of incorp	poration/qualification: January 15, 2010 Document number: P1000000	<u>6</u> 1
5. The name and	street address of the current registered agent and registered office on file with the truent of State: (If resigned, enter resigned) ALAN FUNG (RESIGNED)	
	1098 E HIUSBORD BLVD	
	DEFREED BEACH, FR 33441	<u>ب</u>
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	SE! 23
	434 SE 13th DRIVE	:
	P.O. BOX NOT acceptable DEERFIELD BEACH, FL 3344/	,
The street addre	ess of its registered office and the street address of the business office of its registered ag be identical.	gent
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
A	AMY WAI CHAIRMAN Printed or toped name and title	_
I hereby accept I further agree t performance of a agent. Or, if thi	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered s document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	!
	Mainte of Registered Agents Agents Agents Agents	
If signing on bel	half of an entity:	
<u>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ </u>	Control Name	
•	* * * FILING FEE: \$35.00 * * *	
	Marza de Caración	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)