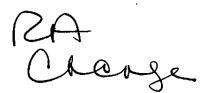
P1000081047

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

Office Use Only



800217357198



01/09/12--01020--020 **35.00



1 /11/12

COVER LETTER

то:	Amendmen Division o	nt Section f Corporations	•				
SUBJE	ECT:	REY WIWI FOO	DD DISTRIB		<u>C</u>		
DOCU	MENT NU	MBER:	P1000008	1047			
		ment of Change of Registe		and fee are sub	omitted for filing.		
Please	return all co	rrespondence concerning t	his matter to the f	ollowing:			
		N	MADYS GALVE	ΞZ			
	•	Na	me of Contact Per	rson			
REY WIWI FOOD DISTRIBUTORS INC							
	Firm/Company						
7313 S.W. 107 AVE							
	Address						
		422	1 1	15 y 10 10 10 10 10 10 10 10 10 10 10 10 10			
	MIAMI, FLORIDA 33173						
- City/State and Zip Code							
		mady	sgalvez@msn.	com			
		E-mail address: (to be u	sed for future an	nual report no	otification)		
					•		
For furt	her informa	tion concerning this matter	, please call:	, ,			
		Madys Galvez	at (786	406-2784 ytime Telephone Number		
	Nam	e of Contact Person	- Ai	rea Code & Da	ytime Telephone Number		
Enclose	d is a \$35.00	O check made payable to the	ne Department of	State.			
		Mailing Address: Amendment Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	tions	Clifton Buil	Section Corporations ding tive Center Circle		

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

statement of ch	provisions of sections 607. ange is submitted for a corp er to change its registered o	poration organized un	der the laws of the Stat	e of Florida
	the corporation: REY W			
2. The principa	office address: 7313 S.\	W. 107 AVE, MIAI	MI, FLORIDA 3317	<u>'3</u>
3. The mailing	address (if different):			
4. Date of incor	poration/qualification:	10/04/2010 D	ocument number:	P10000081047
	d street address of the curre rtment of State: (If resigned		d registered office on fi	le with the
	YUSLEIBY HERREI	RA		
	10801 S.W. 109TH	COURT, APPART	MENT D108	
	MIAMI, FLORIDA 33	3176		4,00
6. The name an (if changed):	d street address of the new	registered agent (if cha	anged) and /or registere	
	MADYS GALVEZ			A F
	5081 S.W. 95 COUF	RT		EN P
		PO Box NOT acceptab	le	
	MIAMI, FLORIDA 33	3165		<u></u>
	ess of its registered office I be identical.			
Such change w authorized by t	as authorized by resolution he board, or the corporation	n duly adopted by its on has been notified in	board of directors or be writing of the change	by an officer so e.
_ Jry			ice president	ond title
I hereby decept I further agree of my duties, an document is be corporation ha	the appointment as regist to comply with the provisi of I am familiar with and c ing filed merely to reflect to s been notified in writing o	ered agent and agree ons of all statutes rel accept the obligation a change in the regist of this change.	to act in this capacity ative to the proper and of my position as regi ered office address, T). I complete performance stered agent. Or, if this hereby confirm that the
Usali	WL.		12/9/11	
	marker of Registered Agent chalf of an entity:		Date	
<u> </u>	yped 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