

P100000 832 85

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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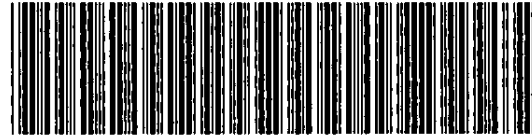
(Business Entity Name)

(Document Number)

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13 MAY 23 PM 1:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PA Change

S-29-13

DC

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** COMEX TRADING INC  
Name of Corporation

**DOCUMENT NUMBER:** P10000083285

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:

RAJA MAHEK  
Name of Contact Person

COMEX TRADING INC  
Firm/Company

6501 CONGRESS AVE.  
Address

BOCA RATON, FL 33487  
City/State and Zip Code

RAMAL1968@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAJA MAHEK at ( 561 ) 244 5441  
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

**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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CEMEX TRADING INC
2. The principal office address: 6501 CONGRESS AVENUE  
BOCA RATON, FL 33487
3. The mailing address (if different): SAME AS ABOVE
4. Date of incorporation/qualification: 10/11/2010 Document number: P10000083285
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)

MATEX, LATA A  
8927 HYPOUXO RD, Suite M4  
LAKE WORTH, FL 33467

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

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND RD.  
P.O. Box NOT acceptable  
PLANTATION, FL 33324

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

NADIA MATEX  
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

May 4 2013  
Date

If signing on behalf of an entity:

Lanita Raney, Assistant Secretary  
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 (03/12)

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