## P11000063319

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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

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SUBJECT: Scottish Spirits Imports, INC.

DOCUMENT NUMBER: P/1 0000 6 3319

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:

William J. BROWN William J. BROWN P.A Firm/Company 777 BRICKOLL FMC Suffer 1114 Address

Minie Florido 33131 City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

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

. .. CR2E045 (03/12)

## 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

MOUT • statement of change is submitted for a corporation organized under the laws of the State of \_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Scottish Spirits Fmports, FNC 2. The principal office address: 3101 NORTH FEDERAL HEGGING
2. The principal office address: 3101 NORTH FEDERAL HEGGING
SUITE 301 C FE LANDERDALE FL 33306
3. The mailing address (if different):
4. Date of incorporation/qualification: 07/12/2013 Document number: P11 0000 6 3319
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)
REBIGNED F
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
WIII THAT, Davies I.
777 BRICKEL ANC SUIFE 1114 P.O. Box NOT acceptable
MIAMI FLORIDA 33131
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

change. authorized by the

ficer or director

ame and title

Date

I here be 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 of Registered Agent

If signing on behalf of an entity:

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)