P11000082954

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
<u></u>	WAIT					
(Bu	ısiness Entity Nar	me)				
(business Enuty Name)						
(Document Number)						
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer:						

Office Use Only



200212584942

10/03/11--01008--020 **35.00

RA: My



12-5-1

COVER LETTER

то:	Amendmen Division of	t Section Corporations						
SUBJECT: VENDAME SU ORO INC Name of Corporation								
DOCU	JMENT NUM	MBER: P11	000082954					
			e/Agent and fee are submitted for filing.					
Please	return all cor	respondence concerning this matte	r to the following:					
	_	CARLOS	SANCHEZ					
	_	Name of Co	ntact Person					
	VENDAME SU ORO INC							
	•	Firm/C	ompany					
	_		K HILL PL					
		Ado	ress					
		OB! AND	FL 00047					
		ORLANDO City/State a	o, FL 32817 nd Zip Code					
		City/State a	nu Zip Code					
E-mail address: (to be used for future annual report notification)								
For fu	rther informat	ion concerning this matter, please	call:					
	CA	RLOS SANCHEZ	at (321) 287-1407					
		e of Contact Person	at (321) 287-1407 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					

TO:

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

statement of cha	nge is submitted for a co	rporation organize	607.1508, or 617.1508, Flo d under the laws of the Stat d agent, or both, in the Stat	te of FLORIDA	
1. The name of t	he corporation: VEND	AME SU OR	O INC		
	office address: 3230 B D, FL 32817	UCK HILL PL	W-10-11		
3. The mailing a	ddress (if different): SA	ME AS ABOVE			
4. Date of incorp	ooration/qualification:	09/21/2011	Document number:	P11000082954	
	street address of the curtiment of State: (If resigne		at and registered office on f	ile with the	
	YEIMY CASTELLA	NOS (RESIGN	ED)		
	3230 BUCK HILL F	PL			
	ORLANDO, FL 328	317			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): CARLOS SANCHEZ					
	3230 BUCK HILL F	PI			
		P.O. Box NOT ac	ceptable		
	ORLANDO, FL 328	317			
The street addre	ess of its registered offic be identical.	e and the street ad	dress of the business offic	e of its registered agent,	
Such change was authorized by the	as authorized by resolution board, or the corporat	on duly adopted b	y its board of directors or led in writing of the change	. (/ / /	
I further agree to of my duties, an document is bei corporation has	the appointment as reging comply with the provided Lam familiar with and not filed merely to reflect been notified in writing mature of the state of	stered agent and a sions of all statute laccept the obliga t a change in the r g of his change.	Printed or typed name agree to act in this capacity is relative to the proper and	y. id complete performance istered agent. Or, if this hereby confirm that the	
	half of an entity:		ō		

* * * FILING FEE: \$35.00 * * *