

P110000090626

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

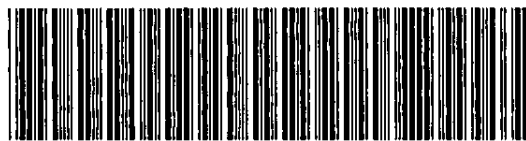
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500248540155

06/12/13--01013--008 **35.00

FILED
CLERK OF COURT
13 JUL -9 PM 4:58

R+R/chg
@ 7.9.13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Wines From Spain Inc.
Name of Corporation

DOCUMENT NUMBER: P 11000090626

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:

Philippe Pinel
Name of Contact Person

Wines From Spain Inc.
Firm/Company

1167 NW 167 Drive.
Address

Miami Gardens, FL 33169.
City/State and Zip Code

pinel@ciospala.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Philippe Pinel at (305) 477 1650
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 14, 2013

PHILIPPE PINEL
WINES FROM SPAIN, INC.
1167 NW 167 DRIVE
MIAMI GARDENS, FL 33169

SUBJECT: WINES FROM SPAIN, INC.
Ref. Number: P11000090626

We have received your document for WINES FROM SPAIN, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 613A00015059

RECEIVED
JUN 12 3 33 AM
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

1. The name of the corporation: Wines From Spain, Inc.
2. The principal office address: 1167 NW 159 Drive
Miami Gardens, Fl. 33169
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/14/2011 Document number: P11000090626
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)

Philippe Pinel
1055 NW 159 Drive
Miami Gardens, Fl. 33169

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

Anne Maryse Lopez
1167 NW 159 Drive
P.O. Box NOT acceptable
Miami Gardens, Fl. 33169

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.

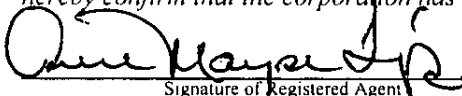


Signature of an officer or director

Philippe Pinel

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 of Registered Agent

7/5/13

Date

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

FILED
CLERK OF STATE
13 JUL -9 PM 4:59