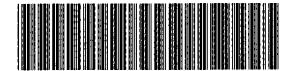
## P11000107070

(Re	equestor's Name)	
(Ad	ldress)	
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## **COVER LETTER**

Division of Corporations				
SUBJECT: SOUTH SMOOTHIES INC.  Name of Corporation				
DOCUMENT NUMBER: P11000107070				
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:				
LORENA HERNANDEZ				
Name of Contact Person				
SOUTH SMOOTHIES INC. Firm/Company				
Paris Company				
12400 SW 100 STREET				
Address				
MIAMI,FL 33186				
MIAMI,FL 33186 City/State and Zip Code				
DIEGOPEREZ26@GMAIL.COM				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
LORENA HERNANDEZ at ( 954 ) 397-6268  Name of Contact Person Area Code & Daytime Telephone Number				
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  Street Address: Amendment Section				

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida The is submitted for a corporation organized under the laws of the State of To change its registered office or registered agent, or both, in the State of	FLORI		
1. The name of t	ne corporation: SOUTH SMOOTHIES INC.			
2. The principal	office address: 3301 SW 22 STREET, MIAMI, FL 33145			
3. The mailing a	ddress (if different): 59 DEEP WOODS WAY, ORMOND BEAC	H, FL 3	2174	
4. Date of incorp	oration/qualification: 12/19/2011 Document number:	P11000	107070	
	street address of the current registered agent and registered office on file venent of State: (If resigned, enter resigned)	with the		
	SPIEGEL & UTRERA, P.A.		Ξu,	<u>_</u>
	1840 SW 22 STREET, 4TH FLOOR	_	E SE	2 FEB
	MIAMI, FL 33145			3-6
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered of	office		国の
	LORENA HERNANDEZ	<del></del>	ŞĦ	#67Y
	12400 SW 100 STREET			
	P.O. Box NOT acceptable  MIAMI, FL 33186			
The street addre as changed will	es of its registered office and the street address of the business office of be identical.	its registe	ered agent	t,
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by a board, or the corporation has been notified in writing of the change.	an officer	so	
- House	LORENA HERN rol an officer or jurector Printed or typed name and	11.41.0		
I further agree t of my duties, and document is/beil	the appointment as registered agent and agree to act in this capacity. It is comply with the provisions of all statutes relative to the proper and confirm a familiar with and accept the obligation of my position as register in the manual properties of the filed merely to reflect a change in the registered office address, I here been notified in writing of this change.	omplete pe red agent. eby confi	erformanc Or, if thi rm that the	e is e
-GON	ONOG 02/02/201:	2		
If signing on bel	nalf of an entity:			
Ту	ped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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