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SECRETARY OF STATE

R. WHITE DEC 0.3 2018

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: J/C FOODS NC. Name of Corporation
DOCUMENT NUMBER: P160000 53688
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:
Name of Contact Person JVE FOOTS, NC Firm/Company 8362 PINES BWD. #218 Address REMBROKE FINES #2. 37024 City/State and Zip Code Leepitcooljac @ amail. Corr E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: OVERIA R. Ruizat JOF SST-1588 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 Torida.
1. The name of the corporation: TVd Fcots, No
2. The principal office address: 4320 No. STATE RD 7 CORAL SPRINGS, FL 33067
3. The mailing address (if different):
SAME.
4. Date of incorporation/qualification: $6/15/16$ Document number: $9/60005368$
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)
GABRIEL GRANA (RESIENES)
3300 NE 192 ST #608 00 00
AVENTURA FL 33180 FR 28 80 80 80 80 80 80 80 80 80 80 80 80 80
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Social Property Soci
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.
Manuflicer or director Results of the Constant of Signature of an officer or director Results of 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 confign that the corporation has been notified in writing of this change.
Mole M. Hou, 18, 2018 Signature of Registered Agent Date
I: ag on behalf of an entity:
E. VIO CESAR PUIZ Typed or Printed Name

Make Checks payable to Florida Department of State Mighto: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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