## #P18000045953

Office Use Only



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## **COVER LETTER**

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| TO: Ame<br>Divi        | endment Section<br>ision of Corporations  |                                |  |
|------------------------|---|--------------------------------|--|
| SUBJECT:<br>Name of Co | FOODTRUCKING USA, INC.                    |                                |  |
| DOCUMEN                | NT NUMBER: 83-0613721                     |                                |  |
| The enclosed           | d Statement of Change of Registered Offi  | ce/Agent and fee ar            | e submitted for filing.                    |
| Please return          | all correspondence concerning this matte  | er to the following:           |  |
| PAOLO MIL              |   |                                |  |
|                        | CKING USA, INC.                           |                                |  |
| Firm/Compa             |   | <del></del>                    |  |
| 141 SE 7th A           | VENUE                                     |                                |  |
| Address                |   |                                |  |
| POMPANO I              | BEACH, FL 33060                           |                                |  |
| City/State an          | nd Zip Code                               | · .                            |  |
|                        | paułmilani.01@gmail.com                   |                                |  |
| E-mail addr            | ress: (to be used for future annual repo  | ort notification)              | <del></del>                                |
| For further in         | nformation concerning this matter, please | call:                          |  |
| PAOLO MIL              | ANI                                       | at ( 917                       | 861 - 4020                                 |
|                        | Name of Contact Person                    | Area Code                      | ) 861 - 4020<br>& Daytime Telephone Number |
| Enclosed is a          | a \$35.00 check made payable to the Depa  | rtment of State.               |  |
|                        | Mailing Address: Amendment Section        | Street Address: Amendment Sect |  |
|                        | Division of Corporations                  | Division of Corporations       |  |

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314

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

| in order to change its registered office or registered agent, or both, in the State of Florida.  1. The name of the corporation:  FOODTRUCKING USA, INC.  2. The principal office address:    41 SE 7th AVENUE, POMPANO BEACH, FL 33060  3. The mailing address (if different):    4. Date of incorporation/qualification:    05/17/2018   | statement of cha  | nge is submitted for a corporation   | 7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of FLORIDA   |               |  |
|--|---|--|--|---------------|--|
| 2. The principal office address: 141 SE 7th AVENUE, POMPANO BEACH, FL 33060  3. The mailing address (if different):  4. Date of incorporation/qualification: 05/17/2018 Document number: P18000045953  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)  COHN, SCOTT E, ESQ  800 SE 3RD AVENUE, SUITE 200  FORT LAUDERDALE, FL 33316  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  REBOA LAW FIRM  12 SE 7TH STREET, SUITE 704  PO. Box NOT acceptable  FORT LAUDERDALE, FL 33301  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.  PAOLO MILANI  Pholo MILANI |   |  | •  | _             |  |
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| If signing on behalf of an entity:   | Mrr.<br>Sign  | ature of Registered Agent  | 5/10/2094<br>Date  |               |  |
| REBOR LAW FIRM   |   |  |  |               |  |
|  | REBOR   | CAW FIRM   |  |               |  |

:";

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E(H5) (04/13)