

PP4000034633

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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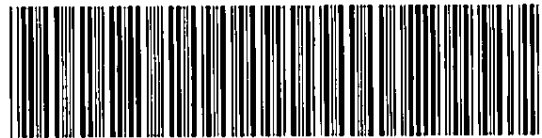
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Super American Import Inc.  
Name of Corporation

**DOCUMENT NUMBER:** 094000034033

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:

Michael Anon, Esq  
Name of Contact Person

The Anon Law Firm  
Firm/Company

7975 NW 155 Street, #A  
Address

Miami Lakes FL 33014  
City/State and Zip Code

Walter Anon@anonlawfirm.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Anon at ( 305 ) 801 5419  
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Super American Import Inc.
2. The principal office address: 5395 NW 105 St. #102, Miami, FL 33014
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 05/05/1994 Document number: P94000034633
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)


Lin. Fu Shun  
1522 Whitehall Drive, #103  
Davie, FL 33324

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

Onslaidy Malhin  
19200 West Oakmont Drive  
P.O. Box NOT acceptable  
Hiattah, FL 33015


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 its officers, so authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

Onslaidy Malhin, President  
\_\_\_\_\_  
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

02/14/18  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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