## P9900086140

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

APPROVEL: AND FILED

RA. Change

C. Gouillette JUN 1 3 2007

## **CQVER LETTER**

Division of Corporations
SUBJECT: Sunshine Foods of Florida, Inc. (Name of Corporation)
DOCUMENT NUMBER: P9900086140
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:
Florence Lissade (Name of Contact Person)
Sunshine Foods of Florida. Inc (Firm/Company)
929 NE125thst (Address)
North Miami, FC 33161 (City/State and Zip Code)
For further information concerning this matter, please call:
Florence Lissade at (786) 356-6267 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.

Street Address: Amendment Section

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Mailing Address: Amendment Section

P.O. Box 6327

**Division of Corporations** 

Tallahassee, FL 32314

TO:

Amendment Section

## 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: Sunshine Foods of Florida, Inc	
2. The principal office address: 929 NE 125 th St North Miami, FL 3316/	·
3. The mailing address (if different):	
4. Date of incorporation/qualification: 9 27 99 Document number: P99 00086140	)
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Florence Lissade	
3750 NW28th St #201	
Miami, FL 33147	01 0
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
929 NE125th Street	i n
(P.O. Box NOT acceptable)	7.4.T.
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 of director)  Florence Lissade (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) (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
CR2E045 (8/05)