	ncipal Place of Business:			
4201 BROADV	VAY AVENUE			
WEST PALM E	3EACH, FL 33407			
Current Ma	iling Address:			
PO BOX 10	11			
LAKE WOR	TH, FL 33460 US			
FEI Numbe	r: 47-4109338		Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:	:		
	IOHNNY JACINTO			
312 S. A STRE	ET , FL 33460 US			
LAKE WORTH	,TE 33400 03			
	ed entity submits this statement for the purpose of change	ing its registered office or regis	tered agent, or both, in the State of Floric	la.
The above name		ing its registered office or regis		^{da.} 05/01/2022
The above name	d entity submits this statement for the purpose of change	ing its registered office or regis		
The above name SIGNATUR	ed entity submits this statement for the purpose of change E: JOHNNY CIFUENTES	ing its registered office or regis		05/01/2022
The above name SIGNATUR	ed entity submits this statement for the purpose of change E: JOHNNY CIFUENTES Electronic Signature of Registered Agent	ing its registered office or regis		05/01/2022
The above name SIGNATUR Officer/Dire	ed entity submits this statement for the purpose of change E: JOHNNY CIFUENTES Electronic Signature of Registered Agent			05/01/2022
The above name SIGNATUR Officer/Dire Title	ed entity submits this statement for the purpose of change E: JOHNNY CIFUENTES Electronic Signature of Registered Agent ector Detail : VP	Title	Ρ	05/01/2022
The above name SIGNATUR Officer/Dire Title Name Address	ed entity submits this statement for the purpose of change E: JOHNNY CIFUENTES Electronic Signature of Registered Agent ector Detail : VP CIFUENTES, IRMA M	Title Name Address	P CIFUENTES, JOHNNY JACINTO	05/01/2022
The above name SIGNATUR Officer/Dire Title Name Address	ed entity submits this statement for the purpose of change E: JOHNNY CIFUENTES Electronic Signature of Registered Agent ector Detail : VP CIFUENTES, IRMA M 312 S. A STREET	Title Name Address	P CIFUENTES, JOHNNY JACINTO 312 S. A STREET	05/01/2022

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHNNY JACINTO CIFUENTES

PRESIDENT

05/01/2022 Date

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P15000046844

Entity Name: JACINTO'S KITCHEN INC

FILED May 01, 2022 Secretary of State 0224276555CC