(Requestor's Name)					
(Address)					
(Address)					
(City/S	State/Zip/Phon	ne #)			
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificate	s of Status			
Special Instructions to Filing Officer:					

Office Use Only

G. MCLEOD

OCT 2 9 2012

**EXAMINER** 



400241172164

10/26/12--01008 -025 \*\*25.00

## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJ	SUBJECT: Cassab Global Trading LLC				
	Name of	f Limited	i Liability	y Company	
Dear	Sir or Madam:				
The e	nclosed Registered Agent/Registered	Office (	Change an	nd fee(s) are submitted for filing.	
Please	e return all correspondence concernir	ng this m	atter to th	ne following:	
Michelle Rolon Name of Person					
	Name of Person				
	Rolon Group Inc. Firm/Company			•	
	Timbedinpany				
	0000 0141 0711- 4 0	- 004			
	2600 SW 27th Avenue Suite 601 Address				
	Addiess				
	A.F				
	Miaml, Florida 33133 City/State and Zip Code		<del></del>	-	
	City/State and Exp Code				
	rolongroup@gmail.com				
E	rolongroup@gmail.com -mail address: (to be used for future annual report	rt notification	on)	-	
For fi	urther information concerning this ma	atter, ple	ase call:		
	Graciela Cassab	-4.6	<b>603</b> )	) 461-1373	
	Name of Person	at (_		rea Code & Daytime Telephone Number	-
				• •	
	STREET/COURIER ADDRESS:		MAILING ADDRESS:		
	Registration Section		Registration Section Division of Corporations		
	Division of Corporations Clifton Building		P.O. Box 6327		
	2661 Executive Center Circle		Tallahassee, Florida 32314		
	Tallahassee, Florida 32301				
	Enclosed is a check for the following amount:				
	\$25 Filing Fee		\$55	Filing Fee & Certified Copy	

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company:	Cassab Global Trading LLC
2. (a) Principal office address of limited liability com	pany: 3577 Loquat Avenue
(Note: MUST BE STREET ADDRESS)	Miami, Florida 33133
(b) Mailing address of limited liability company:	3109 Grand Avenue
(Note: MAY BE POST OFFICE BOX)	Suite 429 Miami, Florida 33133
August 17, 2012  3. Date of filing/registration in Florida	L12000106537 4. Document number
5. (a) Registered Agent and Registered Office shows	
Registered Agent:	Ware Law International
Registered Office Address:	3577 Loquat Avenue Coconut Grove, Florida 33133
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	NEW Registered Office address: Rolon Group Inc.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2600 SW 27th Avenue Suite 601 Miami ,FL33133
If the limited liability company is not organized under confirmed that after the change or changes are made, the and the business office of the registered agent will be liability company, it is hereby confirmed that the change of the members of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company of a member.  Graciela Cassab  Printed or typed name of signee  I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of a complete took, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability confirmation the limited liability confirmati	T 26 PH 2: 3 ASSEE, FLOR
Graciela Cassab	nd agree to act in this capacit e proper and complete perfor ly position as registered agent o merely reflect a change in th pany has been notified in writ

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00