P05000158544

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

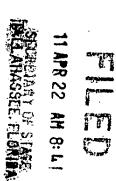
Office Use Only



700203660127

04/22/11--01015--004 **35.00

Kozh



14 11-27-11

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CML Engineers, Inc Name of Corporation
DOCUMENT NUMBER: P05000 158544
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:
Name of Contact Person
CML Engineers, Inc Firm/Company
1300 Ponce le Leon Blud # 1104 Address
Coval Goldes FL 33134 Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Music O. Lui at (186) 271 2540 Name of Contact Person Area Code & Daytime Telephone Number
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: CML Engineers, Inc.	
2. The principal office address: 1300 Ponce de Leon Blvd # 1104 Coval Gables, FL 33134	
3. The mailing address (if different):	
4. Date of incorporation/qualification: Dec boos Document number: P05000 15854	 _4
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 regioned) 4460 Hodges Blvd # 1016	
Jacksonville, Fl 30004	N
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): 1300 Ponce De Leon Blvd # 1104 Covol Gobles, FL 33134 P.O. Box NOT acceptable	
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.	
Melsie O. Lui / President Signature of arrothicer or director Melsie O. Lui / President Printed or typed frame 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.	
Melsie O Lie 4/18/11	
If signing on behalf of an entity:	
Melsie O. Lui Typed or Printed Name	

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