

P10000069204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

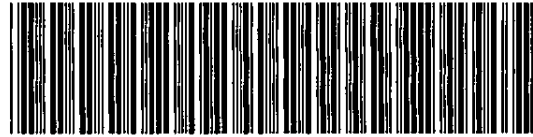
(Business Entity Name)

(Document Number)

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OCT 15 2012

C. MUSTAIN

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12 OCT 11 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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512 4000 2522

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ML INTERNATIONAL ENTERPRISES INC.
Name of Corporation

DOCUMENT NUMBER: PI0000069204

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:

Monika Lindner Ramos
Name of Contact Person

ML International Enterprises, Inc.
Firm/Company

806 East Windward Way Apt #301
Address

Lantana, Florida 33462
City/State and Zip Code

lindnermonika@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Monika Lindner Ramos at (561) 713-4017
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 25, 2012

MONIKA LINDNER ROMOS
806 EAST WINDWARD WAY APT 301
LANTANA, FL 33462

SUBJECT: ML INTERNATIONAL ENTERPRISES, INC.
Ref. Number: P10000069204

We have received your document for ML INTERNATIONAL ENTERPRISES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carol Mustain
Regulatory Specialist II

Letter Number: 712A00023037

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

FILED
12 OCT 11 AM 12
STATE OF FLORIDA
TALLAHASSEE

- 1. The name of the corporation: ML International ENTERPRISES INC
- 2. The principal office address: 1599 SW 30th AV Boynton Beach FLORIDA 33426.
- 3. The mailing address (if different): PO BOX 4239 LANTANA 33465 FLORIDA.

4. Date of incorporation/qualification: 8/23/2010. Document number: P10000069204.

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)

MONIKA LINDNER ML International Enterprises Inc.
806 East Windward way apt # 301.
Lantana, FL 33462.

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

MONIKA LINDNER.
1599 SW 30th AV. Boynton Beach 33426 FL.
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.

[Signature]
Signature of an officer or director

MONIKA LINDNER (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.

MONIKA LINDNER
Signature of Registered Agent

10/11/2012
Date

If signing on behalf of an entity:

MONIKA LINDNER
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