

PO7000062344

Florida Department of State
Division of Corporations
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From:

Account Name : MARTIN ACCOUNTING & TAX SERVICE, INC
Account Number : I20060000012
Phone : (305) 826-5886
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REGISTERED AGENT CHANGE

ATTILA SERVICES & IRRIGATION CORP

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for 6/28/07

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MARTIN

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Florida Dept of State



June 22, 2007

FLORIDA DEPARTMENT OF STATE

Division of Corporations

ATTILA SERVICES & IRRIGATION CORP

12250 SW 129 COURT

108

MIAMI, FL 33129

SUBJECT: ATTILA SERVICES & IRRIGATION CORP

REF: P07000062344

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DIVISION OF CORPORATIONS

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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: ATTILA SERVICES & IRRIGATION CORP
- 2. The principal office address: 12250 SW 129 COURT STE 108 MIAMI, FL 33129
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 06/26/2007 Document number: P07000062344

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

BARROS GRACIELA
15076 SW 20 LN, MIAMI, FL 33185

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 TALLAHASSEE, FLORIDA

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

LIMA BIENVENIDA C
10425 SW 112 AVE, MIAMI FL 33176
(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] BIENVENIDA C LIMA PDT
(Signature of an officer or director) (Printed in 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] 06/12/2007
(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
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