

A07000000075/

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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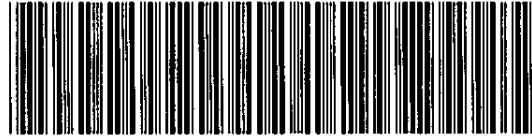
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 28 2015

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PD Family Holdings, Ltd.  
Name of Limited Partnership or Limited Liability Limited Partnership

**DOCUMENT NUMBER:** A07000000751

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Luis Parajon

Contact Person

Firm/Company

355 Hampton Lane

Address

Key Biscayne FL 33149

City, State and Zip Code

lparajon@ambricourt.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luis Parajon

Name of Contact Person

at ( 305 ) 491 6112

Area Code and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP  
STATEMENT OF CHANGE OF REGISTERED OFFICE OR  
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. PD Family Holdings, Ltd.  
Name of Limited Partnership or Limited Liability Limited Partnership
2. 06/06/2007 3. A07000000751  
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Charlotte R. Sevilla  
Name  
15829 NW 82 Ct.  
Address  
Miami Lakes, FL 33016  
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Luis Parajon  
Name  
355 Hampton Lane  
Florida street address (P.O. Box not acceptable)  
Key Biscayne FL 33149  
City, State and Zip

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6. Such change(s) is/are effective when filed by the Florida Department of State.

Luis Parajon  
Signature of General Partner

*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 obligations of my position as registered agent.*

Luis Parajon  
Signature of Registered Agent

**Filing Fee: \$35.00**  
**Certified Copy (optional): \$52.50**