L03000052865

(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:		

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G. MCLEOD FEB 23 2010

EXAMINER



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SECRETARY OF SHAFIONS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ROMEO CA	PITAL, LLC
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Svott Brane Name of Person	
Name of Person	
Panela Calaman	
Rombo CAPITAL, L. Firm/Company	<u></u>
2840 WEST BAY D Address	PK # 136
Address	
BALLSPAIL BLUGGS 3	4. 23770
BEUSHIL BLUFFS, T	
Se - A Real Fabre	74665 6 200
E-mail address: (to be used for future annual report	notification)
For further information concerning this ma	tter, please call:
Scott Brank	at (727) 466 7676
Name of Person	Area 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 follow	ing 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.

1. Name of the limited liability company:	CAPITAL LIC
2. (a) Principal office address of limited liability company:	ROMEO CAPITAL LLC
(Note: MUST BE STREET ADDRESS)	3201 MITCHELL DR LARGO, FE 33770
(b) Mailing address of limited liability company:	Romto CAPITALIUC
(Note: MAY BE POST OFFICE BOX)	2846 WEST BAY OR # 136 BELLGTIR BLUFFS, R 23770
12/15/2003	L03000052865
3. Date of filing/registration in Florida 4	. Document number
5. (a) Registered Agent and Registered Office shown on the	e records of the Florida Dept. of State:
Registered Agent:	BILL BAXTER
Registered Office Address:	4500 140 TO AVEN. #208 CIGARNATOR, FL 33762
(b) Enter name of NEW Registered Agent and/or NEW	Registered Office address:
NEW Registered Agent:	BILL BAXTER
NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	BILL BAXTER 3201 MITCHELL DR LARGO FL 33770
NEW Registered Office Address:	ws of the State of Florida, it is hereby orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirm live was/were provided in the articles of organization.

FILING FEE: \$25.00

INHS18 (05/08)