## L0500000000003

(Requestor's Name)		
(Address)		
(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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SECRETARY OF STATE

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: GELATO CAN (Name of Limit	ted Liability Company)
Dear Sir or Madam:  The enclosed Registered Agent/Registered Office Concerning this material correspondence concerning this material correspondence.	
(Name of Person)  GELATO CAFE UC.  (Firm/Company)  1931 Holly was B  (Address)  Hally was FL 33020  (City/State and Zip Code)	ing _ l
	Area Code & Daytime Telephone Number)  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amo	ount:  \$\Boxed{\sum}\$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: GELAT	o CAFE, LIC	
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	any: 1931 Hollywood BUD.	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Hollywood, FL 33020 1885 Hollywood BLVD	
3 4 05 3. Date of filing/registration in Florida	20500022203 4. Document number	
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:	
Registered Agent:	RUSIN, ALBERTO	
Registered Office Address:	Hollywood (PL 33025	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :		
NEW Registered Agent:	DERCAUTTAN, JORGE	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	HOLYWOOD FL 33020	
If the limited liability company is not organized under that after the change or changes are made, the Florida stroffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the article limited liability company.  (Signature of a member or authorized representative of a member)  (Printed of typed name of signee)	reet address of the registered office and the business e case of a Florida limited liability company, it is d by an affirmative vote of the members of the limited s of organization or the operating agreement of the ASSET OF STARLES	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my positi F.S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been notif	a agree to act in this capacity. I further agree to proper and complete performance of my duties, and I on as registered agent as provided for in Chapter 608 a change in the registered office address, I hereby fied in writing of this change.	
(Signature of Registered Agent)		
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00		