LD6000016496

(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:		
,		
`		

Office Use Only

G. MCLEOD

JAN 2 0 2009

EXAMINER



400139066944

12/18/08--01006--021 **35.00

09 JAN 16 PH 1: 28

SECRETARY OF STATE
DIVISION OF CORFORATION

45

COVER LETTER

Division of Corporations		
SUBJECT: Pana transfer, LLC (Name of Limited Liability Company)		
(Name of Lim	ited 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 this m	natter to the following:	
Luis A. Rojas (Name of Person)		
Panatrans fer, LLC (Firm/Company)		
3034 NW 82nd Ane		
Miami, FL33/22 (City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Person) at ((Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following 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:Panat	transfer, LLC
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Same
2/14/2006	L 060000/6496
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Corporate Creations Network Inc
Registered Office Address:	11380 Prosperity Farms Road
	Palm Beach Gardens, FL 33410
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	Luis A. Rojas 💆 🚟
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3034 NW 82M Ave 5 727
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the chareby confirmed that the change(s) was/were authorized liability company of as otherwise provided in the articles of limited liability company. (Signature of I member or authorized representative of a member)	at address of the registered office and the inciness
Luis A. Rojas (Printed or typed name of signee)	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pram familial with approacept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notifie	agree to act in this capacity. I further agree to roper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby d in writing of this change.
(Signature of Registered Agent)	
Division of Corporations, P.O. Box	