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(Requestor's Name)		
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Office Use Only



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SECRETARY OF STATE

11-18-10,18

COVER LETTER

TO: Registration Section Division of Corporations		٠	÷.
SUBJECT: RA Restaurant Deve Name of Limited	lopers LLC Liability Company		-
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office C	hange and fee(s) are submitted for fili	ng.	
Please return all correspondence concerning this ma	atter to the following:		
Daniel Rojas Name of Person			
Firm/Company	SECRE LAHA	10 NOV	energia Ž
5420 Lyons Rd # 206	NSSEE	6	i mempe
Coconut Creek FL 330 City/State and Zip Code	273	10 NOV 16 AMII: 38	
E-mail address: (to be used for future annual report notification			
For further information concerning this matter, pleas	se call:		
Daniel Rojas al (-	786, 348-3441		_
Name of Person	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 amou	int:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy		

INHS18 (5/08)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR 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: PA Pesto	ivent Developers LLC
2. (a) Principal office address of limited liability company	E120 Lugue Dd # 200
(Note: MUST BE STREET ADDRESS)	Coconut Creek FL 33073
(b) Mailing address of limited liability company:	18232 SW 41 Street
(Note: MAY BE POST OFFICE BOX)	Miramar FL 33029
28th Sept 2007	L07000099313
	4. Document number
 (a) Registered Agent and Registered Office shown on the Registered Agent: 	he records of the Florida Dept. of State: Daniel Rojas
Registered Agent: Registered Office Address:	5420 Lyons Pd#206 Coconut Creek FL \$3073
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5420 Lyons Rd# 206 coconut Creek
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fland the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwork or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Dance Formal State Formal State	aws 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 affirmative vote wise provided in the articles of organization
Division of Corporations, P.O. Box 632	7 Tellahassaa FI 32314

FILING FEE: \$25.00

INHS18 (05/08)