## L07000111052

(Requestor's Name)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
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C. LEWIS
NOV 1 7 2009
EXAMINER

## COVER LETTER.

Division of Corporations			
SUBJECT: PA	ALMAT GLOBAL, LLC		
2020= 4 - ·	f 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			
riease return an correspondence concernin	ig this matter to the following.		
MAURICIO CARO			
Name of Person			
PALMAT GLOBAL, LLO	<u> </u>		
Firm/Company			
10542 SW 161 AV			
Address			
	•		
MIAMI FL. 33196			
City/State and Zip Code			
palmat19@hotmail.com E-mail address: (to be used for future annual report	1		
E-mail address: (to be used for future annual repor	π noutication)		
For further information concerning this ma	atter, please call:		
MAURICIO CARO	at ( 786 ) 356-6473		
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 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:	PALMAT GLOBAL.	LLC
2. (a) Principal office address of limited liability compar	ny: 10542	SW 161 AV
(Note: MUST BE STREET ADDRESS)	MIAMI FL. 33196	<del></del>
(b) Mailing address of limited liability company:	10542 SW 161	AV
(Note: MAY BE POST OFFICE BOX)	MIAMI FL. 33196	
November 01, 2007	L0700011	11052
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown or	the records of the Florida	Dept. of State:
Registered Agent:	MAURICIO CARO	70 28
Registered Office Address:	1437 SW 96 LANE MIAMI FL. 33186	TO THE STATE OF TH
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	EW Registered Office add	Iress FLORID
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	10542 SW 161 AV	<i>&gt;</i>
THE STATE OF THE S	MIAMI	,FL <u>33196</u>
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be identiability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company.  Signature of a member of authorized representative of a member	Florida street address of the ntical. Or, in the case of a less, was/were authorized by serwise provided in the artic	
MAURICIO CARO		
Printed or typed name of signee	<del>_</del>	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my parties to the parties of the parties of the companies	agree to act in this capacit roper and complete perfori osition as registered agent erely reflect a change in th ny has been notified in writ	y. I further agree to nance of my duties, as provided for in e registered office ing of this change.
Signature of Registered Agent		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00