## 130000352

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**EXAMINER** 



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N SERVICE COMPANY.	
ACCOUNT NO. : 12000000195	
REFERENCE : 290106 7897293	
AUTHORIZATION: Spellede man	
COST LIMIT : \$ 25.00	_
ORDER DATE : July 26, 2012	
ORDER TIME : 2:22 PM	
ORDER NO. : 290106-005	
CUSTOMER NO: 7897293	
CHANGE OF AGENT	
NAME: P.A.U.L.SMIRASOL, LLC	
THE D. T. T. C. B. D. PHICADOL, LIC	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY	
CONTACT PERSON: Susie Knight EXT# 2956	
EXAMINER.	

## **COVER LETTER**

TO: Registration Section Division of Corporations			
OND TO PALLES MIDASOL LLC			
SUBJECT: P.A.U.L.SMIRASOL, LLC (Name of Limited Liability Company)			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Offic	ce Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this	s matter to the following:		
DD WEDNED EDION			
DR. WERNER FRICK (Name of Person)			
(Name of Ferson)			
(Firm/Company)			
,			
113 Bianca Drive			
(Address)			
Palm Beach Gardens, FL 33418			
(City/State and Zip Code)	<del> </del>		
For further information concerning this matter, p	please call:		
,			
at	( )		
(Name of Person)	(Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, Florida 32314		
Tallahassee, Florida 32301	<b>,</b>		
Enclosed is a check for the following an	mount:		
☐ \$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: P.A.U.L.SM	IIRASOL, LLC	
2. (a) Principal office address of limited liability compan ( <i>Note: MUST BE STREET ADDRESS</i> )	y: 113 BIANCA DRIVE PALM BEACH GARDENS, FL 33418	_
(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	113 BIANCA DRIVE PALM BEACH GARDENS, FL 33418	- - -
01/12/2009	L09000003527	
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:	NANCY E. CROWN, P.A.	₹
Registered Office Address:	7301 WEST PALMETTO PARK ROAD S	-
	111 5	76
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:	
NEW Registered Agent:	Corporation Service Company	<u>*</u>
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	– س
[MUST BE FLORIDA STREET ADDRESS]	Tallahassee ,FL 32301	
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles of limited liability company.	et address of the registered office and the busing case of a Florida limited liability company, it is by an affirmative vote of the members of the li	ness s imited
Signature of a member or authorized representative of a member)	_	
DR. WERNER FRICK (Printed or typed name of signce)	_	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prom familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited hability company has been notified by	agree to act in this capacity. I further agree to oper and complete performance of my duties, as registered agent as provided for in Chapte change in the registered office address, I here d in writing of this change.	and I er 608, by
(Signature of Registered Agent) Corporation Service Company	Sheryl A. Gibbs, Asst. VP	

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

INHS18 (05/08)