

LO9000011554

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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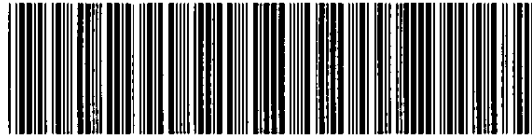
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

B. Tolbert FEB 02 2010

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Applichem, LLC  
Name of 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 this matter to the following:

David J. Pascuzzi, Esq.  
Name of Person

Schwartz & Horwitz, PLC  
Firm/Company

6751 North Federal Highway, Suite 400  
Address

Boca Raton, FL 33487  
City/State and Zip Code

djp@sandhlawfirm.com; jmr@sandhlawfirm.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David J. Pascuzzi, Esq. at ( 561 ) 395-4747  
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 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: Applichem, LLC

2. (a) Principal office address of limited liability company: 5030 Champion Boulevard

(Note: **MUST BE STREET ADDRESS**)

Suite G6-211  
Boca Raton, FL 33496

(b) Mailing address of limited liability company: 5030 Champion Boulevard

(Note: **MAY BE POST OFFICE BOX**)

Suite G6-211  
Boca Raton, FL 33496

2-4-2009

3. Date of filing/registration in Florida

L09000011554

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Javier Zylberberg

Registered Office Address: 3998 FAU Blvd., Suite 210  
Boca Raton, FL 33431

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:** David J. Pascuzzi, Esq.

**NEW Registered Office Address:** 6751 North Federal Highway  
Suite 400  
Boca Raton, FL 33496

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

CLAUDIA ZYLBERBERG.  
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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

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