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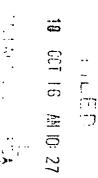
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COVER LETTER

TO: Registration Section

Divisi	on of Corporations				
SUBJECT:	HALO GROUP INTERNATIONAL, LLC				
SOBJECT.	Name of Limited Liability Company				
Dear Sir or M	adam:				
The enclosed	Registered Agent/Registered Offic	ce Change and	fee(s) are submitted for filing.		
Please return a	all correspondence concerning this	s matter to the	following:		
Ludwig S D	orfmeier				
	Name of Person				
HALO GRO	OUP INTERNATIONAL, LLC				
•	Firm/Company	<u> </u>			
P.O. Box 26	66272				
•	Address				
Weston, FL	33326				
	City/State and Zip Code		_ _		
Ludwig.Dor	fmeier@halogroupintl.com				
E-mail a	ddress: (to be used for future annu	ial report notif	ication)		
For further inf	ormation concerning this matter.	please call:			
Ludwig S De	orfmeier	786	600-5199		
	Name of Person	(Area Code & Daytime Telephone Number		
Regist Divisi Clifto 2661 I	cet/Courier address: cration Section on of Corporations n Building Executive Center Circle classee, Florida 32301	Re Dir P.C	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	□ Sa	55 Filing Fee & Certified Copy		
INHS18 (2/14)					

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	lame of the limited liability company:	P INTERNATIO	NAL, LLC	
2. (a)	15398 SW 33 ST	(b) P.O. BOX 266272		
-	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ` `	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	DAVIE, FL 33331	WESTO	DN, FL 33326	
	01/22/2010	L100000	07860	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a	Ludwig S Dorfmeier			
	Registered Agent and Registered Office shown on the records of t	the Florida Dept. of Sta	te:	
	Registered Office Address (MUST BE FLORIDA STREET A	_		
-			څ	
	DAVIE	33331	- 	
	, ŁL		- 	
(b)	Ludwig S Dorfmeier		63	
` ,	Enter name of NEW Registered Agent and/or NEW Registered	- -		
	8810 NW 154 TERR		.C 27	
	NEW Registered Office Address:		_	
	MIAMI LAKES, FL.	33018	<u>-</u> -	
the ch agent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the registered offic ability company, it if the limited liabilit limited liability cor	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in	
Sign	ature of a member of authorized representative of a member	LODWIGSE	Printed or typed name of signee	
I here provis the obto mer notifie	why accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided rely reflect a change in the registered office address. I had in writing of this change.	ee to act in this cap performance of my I for in Chapter 60, vereby confirm that	acity. I further agree to comply with the	