

L10000015200

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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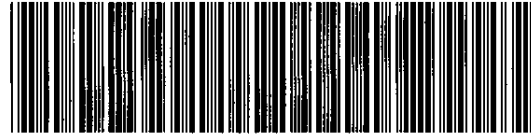
(Business Entity Name)

(Document Number)

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OCT 13 2010
EXAMINER

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 OCT 11 PM 4:55

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mortgage Bankers PBD 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:

Javier Parraquin
Name of Person

Mortgage Banker PBD LLC
Firm/Company

111 N.E. 1st Street, Suite 383
Address

Miami FL 33132
City/State and Zip Code

Javier.mhille@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Javier Parraquin at (305) 773-8983
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

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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: Mortgage Banks PBD LLC

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



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

111 NE 1st Street, suite 383
Miami, FL 33132

(b) Mailing address of limited liability company:



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

111 NE 1st Street, suite 383
Miami, FL 33132

February 9, 2010
3. Date of filing registration in Florida

4. Document number

210000015200

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

Registered Agent:

Alpha Beta One LLC

Registered Office Address:

777 Sw 9th Avenue
Apartment 416
Miami, FL 33130

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

NEW Registered Agent:

Alpha Beta One LLC

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

111 NE 1st Street, u
Suite 383
Miami, FL 33132

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

Printed or typed name of signee

Javier Parroquin
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