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PLUGE FOR OF STATE
ALL ANASSEE, FLORIDA

B. BOSTICK

JUN - 6 2012

EXAMINER

COVER LETTER -

TO ★ Registration Section
Division of Corporations

UBJECT: PFOne MARINE CONSULTING LLC Name of Limited Liability Company								
Dear Sir or Madam:			2	· · · · · · · · · · · · · · · · · · ·				
Dear Sir of Wiadain.								
The enclosed Registere	d Agent/Registered (Office (Change and	d fee(s) are	submitted for	filing.		
Please return all corresp	ondence concerning	this m	atter to the	following:				
PAOLO FERRETTI								
Ŋ	lame of Person							
PFOne MAR	INE CONSULTING	3 LLC						
F	irm/Company							
0450 000	VAL DALAA AVENU							
3153 RO	YAL PALM AVENU Address	<u> </u>						
	Address					$\overline{\mathbf{x}}_{\mathbf{y}_{\mathcal{C}^{n}}}$		
							2	
MIAMI BEACH 33140						\subseteq	■:,	
City/	State and Zip Code					35	1	4 E1
						Si ···	1:-	ď
pafe	erretti@yahoo.it						200	in the
paferretti@yahoo.it E-mail address: (to be used for future annual report notification)						9	1	
MIAMI BEACH 33140 City/State and Zip Code paferretti@yahoo.it E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:								
Paolo F	erretti	at (305)		496 9899			
Name of Po	erson		Area	a Code & Dayti	me Telephone Nu	mber		
	STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section							
Division of Corporations Division of Corporations								
Clifton Building P.O. Box 6327								
			Tallaha	issee, Florida	32314			
Tallahassee, Flor	ida 32301							
Enclosed is a c	heck for the followi	ng amo	ount:					
\$25 Filing Fee			\$55 F	Filing Fee &	Certified Co	ру		

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:	PFOne MARINE CONSULTING LLC			
2. (a) Principal office address of limited liability	company: 3153 Royal Palm Avenue			
(Note: MUST BE STREET ADDRESS)	MIAMI BEACH FL 33140			
(b) Mailing address of limited liability compan	ny:			
(Note: MAY BE POST OFFICE BOX)	3153 Royal Palm Avenue Miami Beach FL 33140			
03/01/2010	L10000022691			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office sh	hown on the records of the Florida Dept. of State:			
Registered Agent:	Paolo Ferretti			
Registered Office Address:	90 Alton Road flat 8			
	Miami Beach FL 33139			
(b) Enter name of <u>NEW Registered Agent</u> and	d/or NEW Registered Office address:			
NEW Registered Agent:	Paolo Ferretti			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRE	3153 Royal Palm Avenue			
	Miami Beach ,FL33140			
If the limited liability company is not organized under the laws of the State of Florida, it is a confirmed that after the change or changes are made, the Florida street address of the register and the business office of the registered agent will be identical. Or, in the case of a Florida liability company, it is hereby confirmed that the change(s) was/were authorized by an affirm of the members of the limited liability company or as otherwise provided in the articles of or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Paolo Ferretti Printed or typed name of signee				
I hereby accept the appointment as registered age comply with the provisions of all statutes relative and I am familiar with and accept the obligations Chapter 508, F.S. Or, if this document is being fil address, I hereby confirm that the limited liability	ent and agree to act in this capacity. I further agree to to the proper and complete performance of my fluties, of my position as registered agent as provided for in led to merely reflect a change in the registered office 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