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EXAMINER

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COVER LETTER

то:	Registration Section Division of Corporations	4		
		3		
SUBJ	WBJECT: Meladi Matadi LLC Name of Limited Liability Company			
D				
Dear	Sir or Madam:			
The e	nclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.		
Please	return all correspondence concernin	g this matter to the following:		
	Praful Patel			
	Name of Person			
	Meladi Matadi LLC			
_	Firm/Company			
	7637 North 56th Street			
	Address			
	Tampa, Florida 33617			
	City/State and Zip Code			
E-	pddesi1294@yahoo.com	notification)		
For fu	rther information concerning this ma	tter, please call:		
	Praful Patel	_ at (803) 747 - 2251		
	Name of Person	Area Code & Daytime Telephone Number		
	STREET/COURIER ADDRESS:	MAILING ADDRESS:		
	Registration Section	Registration Section		
	Division of Corporations	Division of Corporations		
	Clifton Building	P.O. Box 6327		
	2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314		
	Enclosed is a check for the follow	ing 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.

Name of the limited liability company:	Meladi Matadi LLC
2. (a) Principal office address of limited liability company	119 WEST WINDHORST ROAD
(Note: MUST BE STREET ADDRESS)	BRANDON FL 33511 US
(b) Mailing address of limited liability company:	119 WEST WINDHORST ROAD
(Note: MAY BE POST OFFICE BOX)	BRANDON FL 33511 US
04/23/2010	L10000043851
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State
Registered Agent:	PATEL PRAFULBHALD
Registered Office Address:	119 WEST WINDHORST ROAD BRANDON FL 33511 US
NEW Registered Agent: NEW Registered Office Address: (MUST RE FLORIDA STREET ADDRESS)	7637 North 56th Street
(MUST BE FLORIDA STREET ADDRESS)	Tampa ,FL33617
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Fle and the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company. Signature of a member of authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the provision of all statutes relative to the provision of all statutes relative to the provision of the provision of the obligations of my possible to the provision of the provision of the provision of the provision of the obligations of the provision of the provision of the obligations of the provision of the provision of the obligation of the provision of the provision of the obligation of the provision of the provision of the obligation of the provision	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of organization
montofute 5/20/10	

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