## #1/000/13332

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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EXAMINER
DEC 1 4 2010

## **COVER LETTER**

· ·	JO , ER BEITTER
TO: Registration Section Division of Corporations	
SUBJECT:	EURO LLC
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered 0	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
LARRY MELE	
Name of Person	
Firm/Company	<del></del>
5435 LA GORCE DR	
Address	
MIAMI BEACH FL 33140	
City/State and Zip Code	<del> </del>
larrymele@hotmail.com E-mail address: (to be used for future annual report to	notification)
For further information concerning this matter	ter, please call:
LARRY MELE	at ( 305 ) 801 3971
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 32314
Tallahassee, Florida 32301	
Enclosed is a check for the following	ao amount:

\$55 Filing Fee & Certified Copy

\$25 Filing Fee

## 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:	EURO LLC	
2. (a) Principal office address of limited liability company	: EURO LLC	
(Note: MUST BE STREET ADDRESS)	130 3RD STREET # 105 MIAMI BEACH FL 33139	
(b) Mailing address of limited liability company:	EURO LLC	
(Note: MAY BE POST OFFICE BOX)	5435 LA GORCE DR MIAMI BEACH FL 33140	
11/01/2010	L10000113332	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	ETTORE SEVERINO	
Registered Office Address:	130 3RD STREET # 105 3 5 MIAMI BEACH FL 33139 5 9 1	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	W Registered Office address: Fig. 3. E. D. LARRY MELE	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5435 LA GORCE DR MIAMI BEACH 33139 ,FL 33140	
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	_	
ETTOME SEVERINO	-	
Printed or typed name of signee		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my po. Chapter 608, F.S. Or, if this document is being filed to mel address I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.	

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

Signature of Registered Agent