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(Re	questor's Name)	······································			
(Address)					
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(Cit	ty/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificate:	s of Status			
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COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJ	SUBJECT: El Delfin International Marble, LLC Name of Limited Liability Company						
Door S	Sir or Madam:						
Dear 3	on or iviauani.						
The er	nclosed Registered Agent/I	Registered Of	fice Ch	ange	and fee(s) are	submitted for filing.	
Please	return all correspondence	concerning the	nis mat	ter to	the following:	•	
	Eduardo L	0007					
	Name of Pers				_		
	El Delfin Internation	al Marble, L	LC		_		
	Firm/Compar	y					
	1082 Bluewood Terrace						
	Address						
	Weston, FL.	33327					
-	City/State and Zip						
E-	eldelfininternationalma mail address: (to be used for future	ble@hotma	il.com ification)		_		
For fu	rther information concerning	ng this matter	, pleas	e call:			
	Eduardo Lopez		at (678)	687-3483	
	Name of Person			A	Area Code & Dayti	me Telephone Number	
	STREET/COURIER ADD	RESS:		MAI	ILING ADDRI	ESS.	
	Registration Section Registration Section						
	Division of Corporations			-	sion of Corpora		
	Clifton Building						
	2661 Executive Center Circ Tallahassee, Florida 32301	le		Talla	ahassee, Florida	a 32314	
	Enclosed is a check for t	the following	amou	nt:			
i	\$25 Filing Fee		Г		5 Filing Fee &	Certified Copy	
	LT 7 2		L		₅ a	Chamba Copy	

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

S

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: El De	elfin International Marble, LLC				
2. (a) Principal office address of limited liability company	991 Silktree Ln				
(Note: MUST BE STREET ADDRESS)	Weston, FL 33327				
(b) Mailing address of limited liability company:	991 Silktree Ln				
(Note: MAY BE POST OFFICE BOX)	Weston, FL. 33327				
02/14/11	L11000019680				
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:	Eduardo Lopez				
Registered Office Address:	991 Silktree Ln. Weston, Fl. 33327				
NEW Registered Agent: NEW Registered Office Address:	1082 Bluewood Terrace				
(MUST BE FLORIDA STREET ADDRESS)					
	Weston ,FL 33327				
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 of 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 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					
Eduardo Lopez 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 providing of am familiar with and accept the obligations of my portugates to 8, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company					

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