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B. BOSTICK
'AUG 1 8 2011
EXAMINER

COVER LETTER

то:	Registration Section Division of Corporations						
SUBJ	ECT: EURO AMERICA Name of Limite						
	Name of Emilia	ca Liabiii	ty Compan	1.9			
Dear S	Sir or Madam:						
The er	nclosed Registered Agent/Registered Office	Change	and fee(s)	are submitted fo	r filing.		
Please	return all correspondence concerning this r	matter to	the followi	ng:			
	DETDA CHALICOE						
	PETRA CHAUSSE Name of Person						
	Firm/Company		_				
	700 NE 90TH Address	. .	_		SEUN	=	
					LAHASSE	11 AUG 17 PH 12: 03	j
	MIAMI FL 33138		_			0	1
	City/State and Zip Code				四次	75	·**
	EMMANUELALDABE@GMAIL.COM	1			EE. FLORID	0	
E-	mail address: (to be used for future annual report notificat	ion)	_		Α.	C.	
For fu	rther information concerning this matter, pla	ease call:					
	EMMANUEL ALDABE at (305)	796-6966			
	Name of Person	1	rea Code & D	Paytime Telephone N	umber	-, -	
•	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regi Divi P.O.	stration Sec sion of Corp Box 6327 hassee, Flo	ction porations			
	Enclosed is a check for the following am	ount:					
	\$25 Filing Fee	\$5 :	Filing Fe	e & 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.

 Name of the limited liability company: <u>EURO A</u> 	MERICAN DEVELOPMENT LLC				
2. (a) Principal office address of limited liability compar	y: 700 NE 90TH ST MIAMI, FL 33138				
(Note: MUST BE STREET ADDRESS)	700 NE 90TH ST MIAMI, FL 33138				
(b) Mailing address of limited liability company:					
(Note: MAY BE POST OFFICE BOX)	700 NE 90TH ST MIAMI, FL 33138				
AUGUST 10, 2011	L11000091953				
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:	ROBERT P. CHAUSSE				
Registered Office Address:	700 NE 90TH ST MIAMI, FL 33138				
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> NEW Registered Agent:	W Registered Office address: PETRA CHAUSSE				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	700 NE 90TH ST				
MUST DE L'EURIDA STREET ADDRESS	MIAMI ,FL33138				
If the limited liability company is not organized under the confirmed that after the change or changes are made, the I and the business office of the registered agent will be identiability company, it is hereby confirmed that the change of the members of the limited liability company or as other the operating agreement of the limited liability company. Signature of a member or authorized representative of a member PETRA CHAUSSE Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of the obligations of my perchapter 608, F.S. Or, if this document is being filed to mand the limited liability company.	Florida street address of the registered office tical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote trwise provided in the articles of organization y.				

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