

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

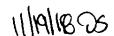
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COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJ	PTE SYSTEMS INTERNAT	ΓΙΟΝΑL, LLC				
	Name of Limited Liability Company					
Dear S	Sir or Madam:					
The er	nclosed Registered Agent/Registered Off	Tice Change and fee(s) are submitted for filing.				
Please	return all correspondence concerning th	fice Change and fee(s) are submitted for filing.				
Micha	ael Nearing	. ·				
	Name of Person					
Near	ing & Egger, PLLC	•				
	Firm/Company					
2000	S. Dixie Hwy., Ste 112					
	Address					
Miam	ii, FL 33133					
•	City/State and Zip Code					
mnea	ring@nearingfirm.com					
	E-mail address: (to be used for future and	nual report notification)				
For fu	rther information concerning this matter	r, please call:				
Micha	ael Nearing	305 573-1550				
	Name of Person	Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
	Enclosed is a check for the following	g amount:				
	S \$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 605.0114 or 605.0116, 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. N	ame of the limited liability company: PTE SYSTE	MS INTE	ERNATIONAL, LLC
2. (a)			
	Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1950 West 8th Avenue		1950 West 8th Avenue
	Hialeah, FL 33010		Hialeah, FL 33010
	01/10/2013		L13000005586
3.	Date of filing/registration in Florida	4.	Document number 5
5. (a)			
•	Registered Agent and Registered Office shown on the records of Dalmau, Sergio Pedro	the Florida	>)
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	 #: 01
	1950 W. 8th Ave		:-
	Hialeah	33010	
	FI.	-	·
(b)			
` '	Enter name of NEW Registered Agent and/or NEW Registered	l Office add	lress:
	Michael G. Nearing		
	NEW Registered Office Address:		
	2000 S. Dixie Hwy., Suite 112		
	Miami , FI	33133	
signa I here provis the obto mer	limited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited light of the identical of the members of icles of organization or the operating agreement of the authorized proper and complete light of all statutes relative to the proper and complete light of my position as registered agent as provide the reflect a change in the registered office address, I din writing of this change.	f the regis ability co of the lim limited li	tered office and the business office of the registered inpany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in ability company. Printed or typed name of signee in this capacity. I further curee to comply with the

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

INHS18 (2/14)