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K.SALY EXAMINER MAR 6 - 2013

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Ere America Name of Lir	LLC
Name of Lir	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.
Please return all correspondence concerning the	is matter to the following:
KARCA VILLALOBOS Name of Person	
EPC AMERICA LLC Firm/Company	<u></u>
3346 N.W. 78 AVE.	υ <i>υ</i> €
DORAC, FL 33/22 City/State and Zip Code	<u>-</u>
E-mail address: (to be used for future annual report notion	com fication)
For further information concerning this matter,	please call:
KARLA VILLALOBOS 8	at ( <u>305</u> ) <u>629-2020</u> Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327
Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following	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.

agent, or both, in the State of Florida.	
1. Name of the limited liability company: FPC A	merica LLC
2. (a) Principal office address of limited liability company:	3346 N.W. 78 AVENUE
(Note: MUST BE STREET ADDRESS)	DORAL, FL 33/22
(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	SAME AS ABOVE
3. Date of filing/registration in Florida 4.	<u>L990000001/8</u> . Document number
5. (a) Registered Agent and Registered Office shown on th	e records of the Florida Dept. of State:
Registered Agent:	MIRIAM C. ALFONSO
Registered Office Address:	3346 N.W. 78 AVENUE DORAL, FL 33/12
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> : <u>NEW Registered Office Address:</u>	Registered Office address:  KARLA VILLALOBOS  3346 N.W. 78 AVENUE
(MUST BE FLORIDA STREET ADDRESS)	DORAL ,FL33/22
If the limited liability company is not organized under the lar confirmed that after the change or changes are made, the Flor and the business office of the registered agent will be identic liability company, it is hereby confirmed that the change(s) when the members of the limited liability company or as otherwise the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	rida street address of the registered office al. Or, in the case of a Florida limited
KARLA VILLALOBOS  Printed or typed name of signee	
I hereby accept the appointment as registered agent and agreements with the provisions of all statutes relative to the propand I am familiar with and accept the obligations of my posi Chapter 608, F.S. Or, if this accument is being filed to mere address, thereby confirm that the similed liability company in the second of the second of the company in the second o	ree to act in this capacity. I further agree to ber and complete performance of my duties, tion as registered agent as provided for in ly 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