

P000000015347

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

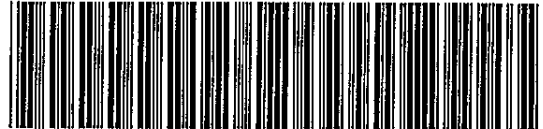
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P00000015347  
388 RACM  
12-12-02

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Imperia? Limited INC  
(Name of corporation)

**DOCUMENT NUMBER:** P00000015347

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Luz Haring Jusakos  
(Name of person)

Imperia? Limited INC  
(Name of firm/company)

2719 S. Orange Blossom trail  
(Address)

Orlando FL 32805  
(City/state and zip code)

For further information concerning this matter, please call:

Luz Haring Jusakos at (407) 839-8474  
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED  
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,  
this statement of change is submitted for a corporation organized under the laws of the State of  
Florida in order to change its registered office or registered agent, or both, in the State  
of Florida.

1. The name of the corporation: Imperial Limited, INC.  
2. The principal office address: 2719 S. Orange Blossom Trail  
Orlando FL 32805  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 2-7-00 Document number: P00000015347

5. The name and street address of the current registered agent and registered office on file with the  
Florida Department of State:

Luz Marina Jusakos  
Pothiti Jusakos  
145 Deer run Dr - Davenport 33

6. The name and street address of the new registered agent (if changed) and /or registered office (if  
changed):

Luz Marina Jusakos  
2719 S. Orange Blossom Trail  
(P.O. Box or personal mailbox not acceptable)  
Orlando FL 32806

The street address of its registered office and the street address of the business office of its registered  
agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so  
authorized by the board, or the corporation has been notified in writing of the change.

[Signature]  
(Signature of an officer, chairman or vice chairman of the board)

Pothiti Jusakos  
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity.  
I further agree to comply with the provisions of all statutes relative to the proper and complete  
performance of my duties and I am familiar with and accept the obligation of my position as  
registered agent. Or, if this document is being filed merely to reflect a change in the registered  
office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]  
(Signature of Registered Agent)

12-09-02  
(Date)

If signing on behalf of an entity:

Luz Marina Jusakos President  
(Typed or Printed Name) (Capacity)

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:  
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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02 DEC 12 PM 4:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA