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CR2E031(7/97)

## PALUMBO USA MIAMI, INC.

8405 N.W. 53rd Street, Suite B220 Miami, Florida 33166 300005728703--5 -06/10/02--01061--013 \*\*\*\*\*35.00 \*\*\*\*\*35.00

Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1	(Corporation Name)	(Document #)		Agr. up. =
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			Examiner's Initials	

## 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,
the undersigned corporation organized under the laws of the State of FLORIDA
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: PALUMBO USA MIAMI, INC.
2. The mailing address of the corporation: KOGER CENTER - 8405 NW 53th STREE
SUITE B-220 - ATHENS BUILDING - MAMI FL 33166
3. Date of incorporation/qualification: OCTOBER 17, 2000 Document number: P00000097549
4. The name and address of the current registered agent and office:
JOHN TRIMARCHI
3610 CARREL BLVD.
OCEANSIDE, MY 11572 SE S
5. The name and address of the new registered agent (if changed) and/or registered office (F changed):
(P. O. Box Not Acceptable)
KOGER CENTER - 8405 N.W. 53th STREET STEET
SUTTE B-220-ATHENS BUILDING - MIAMI, FL 男168
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.
6/4/08
(Signature of an officer, chairman of the board)
FILIPPO PALUMBO PRESIDENT (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
Lea G/2/02
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
MARIA HENLIQUEZ SECRETARY
(Typed or Printed Name) (Capacity)
** * TH INC FFF. \$25.00 * * *

CR2E045(9/00)