## P0200030870

(F	Requestor's Name)	
. (A	address)	
<u> </u>	ddress)	
(0	City/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(B	Business Entity Nan	ne)
(C	Occument Number)	——————————————————————————————————————
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	,	
<del>-</del>		
	Office Use Onl	٧



600079312196

09/08/06--01021--001 \*\*35.00

SECRETARY OF STATEMS

## **COVER LETTER**

TO: Amendment Section Division of Corporations									
SUBJECT: PLANET MARBLE & BRANITE, INC. (Name of Corporation)									
DOCUMENT NUMBER: Po200030870.									
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:									
	-								
FUNGMER, MERCES (Name of Contact Pers	DES CORREA.								
(Name of Contact Pers	son)								
5	- · · -								
PLANET MARBLE & (Firm/Company)	GRANITE, INC.								
60 SW 8TH S (Address)	TREET # 3.								
(Address)									
DEERFIELD BEACH, FL 33441 (City/State and Zip Code)									
(city, ciait and 2.p coat)									
For further information concerning this matter, please call:									
(Name of Contact Person) (A	954 ) 970-7271								
(Name of Contact Person) (A	rea Code & Daytime Telephone Number)								
Enclosed is a \$35.00 check made payable to the Department of State.									
Mailing Address: Amendment Section	Street Address:								
Amendment Section Division of Corporations	Amendment Section Division of Corporations								
P.O. Box 6327	Clifton Building								
Tallahassee, FL 32314	2661 Executive Center Circle								
•	Tallahassee, FL 32301								

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

Pursuant to the p statement of chan	ige is submitted	for a corporat	ion organ	ized under	the laws o	of the State o	FLORI	
in order	to change its re	egistered office	or registe	ered agent,	or both, i	n the State o	f Florida.	
1. The name of th	e corporation:_	PLANET	MAR	BLE 2	GRAT	ווי פנון	۷.	
2. The principal o	office address:_	60 EW	8±#	27	#3	4		
		DEERF	ELD	BEALH	, F	_ 334	41.	
3. The mailing ad	ldress (if differe	ent):						
4. Date of incorpo	oration/qualific	ation: <u>03/</u>	20/20	OZ Docu	ment nun	ber: <u>102</u>	.00003	0870.
5. The name and Florida Departs		f the current re	gistered a	gent and re	gistered o	ffice on file	with the	
-		XX HOU	SE C	02906	LAT 10	<i>。.</i>		
_	1	261 E	. SA	MPLE	Ros	. 0		2:00
- -		261 E Pompor	0 E	3E~C4,	Fι	3306	— <u>,4</u> .	95 SK
6. The name and (if changed):	street address o	f the new regis	tered agei	nt (if chang	ed) and /o	r registered (	office	06 SER -0 PAND
-		FUNG ME	<i>م</i> ر م	1. Co	ere	٠ ـ ـ ـ		
_		60 SW (P.O. Box NO	81	TH ST	- # 3	<b>.</b>		•
-		DEERFI	ELO	BEA	CH, F	در 334	[4]	
The street addres as changed will be	s of its register be identical.	red office and	the street	address of	the busin	ess office of	f its registere	d agent,
Such change was authorized by the	s authorized by board, or the	resolution du corporation ha	ly adopte is been no	d by its bootified in w	ard of dire riting of t	ectors or by he change.	an officer so	
Signature	of an officer or dir	ector)		FUN.	S PAER	or typed name a	ORRED,	<u>D.</u>
I hereby accept t I further agree to of my duties, and document is bein corporation has	he appointmen o comply with t I I am familiar og filed merely been notified i	t as registerea he provisions with and acce to reflect a ch n writing of th	l agent an of all stat pt the obl ange in th is change	d agree to utes relativ igation of i				
AUN	en et la	$\supset$			91	5/06		
<b>O</b> lign	nature of Registered	Agent)			• •	(Date)		
If signing on beh	alf of an entity	<b>':</b>						
/Tv.	ped or Printed Nam	n)						
(19	pour or a ritheu regill	~,						

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

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