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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUB.	BJECT: PALO DE MANGO, INC	
	(Name of Corporation)	
DOC	OCUMENT NUMBER: PO400006688 Regrstered Agent Change e enclosed Officer/Director Resignation for a Corporation and fee are subm	
	Regretered Agent Change	
I he e	e enclosed Officer/Director Resignation for a Corporation and fee are subm	itted for filing
Pleas	ase return all correspondence concerning this matter to the following:	
AN	NTHONY X. MERINO	
	(Name of Person)	
PAL	ALO DE MANGO, INC	
	(Name of Firm/Company)	
654	549 NW 103ER TERRACE	
	(Address)	
PAF	ARKLAND, FL 33076	
	(City/State and Zip Code)	
For fi	r further information concerning this matter, please call:	
ANŢ	NTHONY MERINO at (954) 401-4416 (Name of Person) (Area Code & Daytime Teleph	
	(Name of Person) (Area Code & Daytime Teleph	none Number)
Enclo	closed is a check for \$35.00 made payable to the Florida Department of Sta	te.
Divis Clifte 2661	reet Address: Intendment Section Vision of Corporations Ifton Building It Executive Center Circle Ilahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314	

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

statement of cha		, 607.1508, or 617.1508, Florida Statutes, this red under the laws of the State of FLORIDA red agent, or both, in the State of Florida.		
1. The name of	the corporation: PALO DE MANGO, IN	IC.		
	. The principal office address: 1133 BANKS ROAD MARGATE, FL 33063			
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 01-07-2004	Document number: P0400006688		
	d street address of the current registered agreement of State:	ent and registered office on file with the		
	ANTHONY MERINO			
	3925 NW 88 TERRACE			
	CORAL SPRINGS, FL 3306	5		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	ANTHONY MERINO			
	1133 BANKS ROAD (P.O. Box NOT acceptable)			
	MARGATE, FL 33063			
The street addr	ess of its registered office and the street a l be identical.	address of the business office of its registered agent,		
		by its board of directors or by an officer so ified in writing of the change.		
antho	my Merina ure of an officer or director)	ANTHONY MERINO (P) (Printed or typed name and title)		
I hereby accept I further agree of my duties, an document is be corporation ha	t (He appointment as registered agent and to comply with the provisions of all statu nd I am familiar with and accept the oblig ing filed merely to reflect a change in the s been notified in writing of this change.	l agree to act in this capacity, tes relative to the proper and complete performance gation of my position as registered agent. Or, if this registered office address, I hereby confirm that the		
authon	Meurifi ignature of Registered Agent)	4-28-08		
	epal of Registered Agent)	(Date)		
	McCino Typed or Printed Name)			

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