## P0500031710

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11/15/06--01025--024 \*\*35.00





## **COVER LETTER**

Amendment Section Division of Corporations TO:

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(Name of Corporation) SUBJECT: 1050000 31710 **DOCUMENT NUMBER:** 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: ina Name of **16Ω** L L m (City/State and Zip Code) For further information concerning this matter, please call:

(Name of Contact Person)

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 Clifton Building** 2661 Executive Center Circle Tallahassee, FL 32301

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

1. The name of the corporation: BAN PALK GROUP, COLD.
2. The principal office address: 1201 BRICK ell AVENUE Ste# 650
miami FL 33131
3. The mailing address (if different):
4. Date of incorporation/qualification: 0302 05 Document number: P0500031710
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
CARLOS J. Mattos
4824 Fisher Island Deive
Miami Beach FL 33109
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
CARLOS J. Mattor
1201 BRickell Avenue Ste #650
(P.O. Box NOT acceptable)
Muumu HL 33131
The street address of its registered office and the street address of the business office of its registered gent
Such change was authorized by resolution duly adopted by its board of directors or by an officer to authorized by the board, or the corporation has been notified in writing of the change.
(7 mm) CARLOS J. MATTOS.
(Signature of an officer of difector) (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 1 v duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this do. meny is being filed merely to reflect a change in the registered office address, I hereby confirm that the covoration has been notified in writing of this change.
7 mm 10-31-06.
(Signatule of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)