P06000057535

· (Re	questor's Name)	
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(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(D)	ain and Makika kilom	
(BL	isiness Entity Nam	e)
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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R.A.

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COVER LETTER

SUBJECT:	South America Name of Co		
DOCUMENT NUMBER:	P060	000057535	
The enclosed Statement of Char	ige of Registered Office	Agent and fee are	submitted for filing.
Please return all correspondence	concerning this matter	to the following:	
Nery Lopez Name of Contact Person			
	Name of Col	nact Person	
	South Amer		
 	Firm/Co	mpany	
	9301 sw 4th s	street ant 231	
***	9301 sw 4th street apt 231 Address		
	Miami fl	33174	
City/State and Zip Code			
	southamericanma	rble@amail.com	1
southamericanmarble@gmail.com E-mail address: (to be used for future annual report notification)			
For further information concern	ing this matter, please o	all:	
Nery Lop	oez	at (786	8795173
Name of Contac	t Person	Area Code &	8795173 Daytime Telephone Number
Enclosed is a \$35.00 check mad	e payable to the Depart	ment of State.	
<u>Mailin</u>	z Address: Iment Section	Street A	ddress:
			ment Section
	on of Corporations		n of Corporations Ruilding

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

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: South American Marble Inc.
2. The principal office address: 9301 sw 4th street apt 231
miami fl 33174
3. The mailing address (if different): 930 Sw 4th Stapt 23
miami 723774
4. Date of incorporation/qualification: 04/21/2006 Document number: P06000057535
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Nery Lopez
2265 nw 5th street
2265 nw 5th street miami fl 33125 ARE
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed): Nory Lopez Fig. 7.
9301 sw 4th street apt 231
P.O. Box NOT acceptable
miami fl 33174
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.
Nery Lopez Signature of an officer or director 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.
05/11/2010
Signature of Registered Agent Date
If signing on behalf of an entity:
Nery Lopez Typed or Printed Name

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