

P08000017236

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

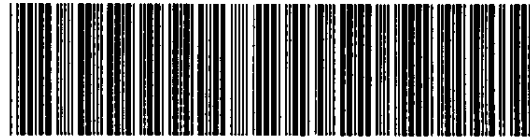
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO: Amendment Section  
Division of Corporations**

**NAME OF CORPORATION: PALM BREEZE VENTURES, INC.**  
**DOCUMENT NUMBER: P08000017236**

The enclosed Statement of Changes of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Roberto Rodriguez Rodriguez  
956 Enclair Street  
Orlando, FL 32828

For further information concerning this matter, please call:  
Kenneth B. Thomson at (407) 571-6888

Enclosed is a check for the following amount:

<input checked="" type="checkbox"/> \$35.00 Filing Fee	<input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (additional copy is enclosed)	<input type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
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**MAILING ADDRESS:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314-6327

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
6327 Clifton Building  
Executive Center Circle  
Tallahassee, FL 32301

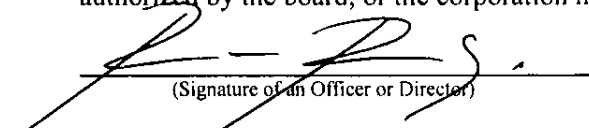
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT  
OR BOTH FOR CORPORATIONS**

*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: **PALM BREEZE VENTURES, INC**
2. The Principal office address: **956 Enclair Street, Orlando, FL 32828**
3. The Mailing address (if different):
4. Date of incorporation/qualification: **02/18/2008** Document No.: **P08000017236**
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:  
**GEORGE CULLEN  
10304 CALLE DE FLORES DRIVE  
CLERMONT, FL 34711**
6. The name and street address of the new registered agent (if changed) and/or registered office (if changed).  
**ROBERTO RODRIGUEZ RODRIGUEZ  
956 ENCLAIR STREET  
ORLANDO, FL 32828**

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.

  
(Signature of an Officer or Director)

Roberto Rodriguez Rodriguez  
(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 status 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.*

  
(Signature of Registered Agent)

October 18, 2010  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

**Filing Fee: \$35.00**