## 209000006737

(Requestor's Name)	,
(Address)	
(Address)	···
(City/State/Zip/Phone #)	·
PICK-UP WAIT MA	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	· ·
Special Instructions to Filling Officer:  Corules downers  by Hughm Cau  In 8/21/1	

Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATIONS ON PM 12: 45

**TROBERS AUG** 2 1 2009

## **COVER LETTER**

TO: Amendment Section Division of Corporations	;					
SUBJECT: THE EVERGLADES 03, CORP.  Name of Corporation						
DOCUMENT NUMBER: P09	9000006737					
The enclosed Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:						
GILLIAN BREAKSPEARE						
Name of Co	ontact Person					
LODD DDEAKODEA	DE CALLACUANULO					
	RE CALLAGHAN LLC					
I HIM'C	ompany					
10913 NW 30	STREET #100					
Address						
DODAL EL 22472 5020						
DORAL FL 33172-5029  City/State and Zip Code						
·						
gcortina@postensa.com.mx						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please	call:					
GILLIAN BREAKSPEARE	at ( 305 ) 274-5811					
Name of Contact Person	at ( 305 ) 274-5811 Area 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	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

			07.1508, or 617.1508, Flor under the laws of the State	
in orde	r to change its register	ed office or registered	agent, or both, in the State	of Florida.
	he corporation: THE			
2. The principal office address: AV. PROLONGACION REFORMA 115				
DESPACHO 901 COL. PASEO DE LAS LOMAS, MEXICO, D.F. MX 01330				
3. The mailing address (if different): AV. PROLONGACION REFORMA 115				
DESPACHO 901 COL. PASEO DE LAS LOMAS, MEXICO, D.F. MX 01330				
4. Date of incorp	oration/qualification:_	JAN. 22, 2009	_ Document number:	P09000006737
	street address of the cutment of State: (If resig		and registered office on fil	e with the
,,	ERICK MAGNO	+ Associa	tes, P. A.	
•	1110 BRICKELL	AVE., SUITE 310		99 1 South
	MIAMI FL 33131			
6. The name and (if changed):	street address of the ne	ew registered agent (if	changed) and for registered	OS NUG 20 PAIR: 45
	GILLIAN BREAKS	SPEARE		· ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
	10913 NW 30 ST	REET #100		
		P.O. Box NOT aco	eptable	
	DORAL FL 33172	-5029		
The street addre	ss of its registered offi be identical	ce and the street add	ress of the business office	of its registered agent,
Such change wa authorized by th	s authorized by resolu e board, or the corpora	tion duly adopted by ation has been notific	its board of directors or bed in writing of the change	y an officer so :
Signalia	of an of specific director	<u></u>	JOSE PABLO CORT	INA CORDERO
<b>-</b> 1		gistered agent and ag visions of all statutes ad accept the obligate of a change in the re tg of this change.	ree to act in this capacity relative to the proper and ion of my position as regis gistered office address, Th	
John	Leahun	<u>~</u>	8/W/05	
Sign	ature of Registered Agent		Date	
If signing on bel	nalf of an entity:		e en	
· ·				
Ty	ped or Printed Name	<del></del>		

\* \* \* 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)