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SECRETARY OF STATE ALLAHASSEE, FLORID;

B.A

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AUG 18 2010

COVER LETTER

TO:	Amendment Section Division of Corporation	ons			
SUBJ	ЕСТ:	Camerino Interr	national Co Corporation	rp	
DOC	JMENT NUMBER:	P10	00000132	8	
The er	iclosed Statement of Ch	ange of Registered Offi	ce/Agent and fo	ee are submit	ted for filing.
Please	return all corresponden	ce concerning this matte	er to the follow	ing:	
		Karer Name of C	n Alsina ontact Person		
		Camerno Inte	ernational Co Company	orp	
	·	2780 NE 18	3rd St. # 100 dress	6 , **. · · ·	
		Aventura City/State	FL 33160 and Zip Code		· ·
	E-mail ad	karemalsin Idress: (to be used for	a@aol.com future annual	report notif	ication)
For fu	rther information conce	rning this matter, please	call:		
	Karem A Name of Conta			ode & Daytii	4786534 ne Telephone Number
Enclo	sed is a \$35.00 check ma	ade payable to the Depa	rtment of State		
	Āme Divis P.O.	ng Address: ndment Section sion of Corporations Box 6327 hassee, FL 32314	An Div Cli 260	eet Address: nendment Se vision of Co fton Buildin 61 Executive llahassee, FI	rporations ig e Center Circle

TO:

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

. . .

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State ofer to change its registered office or registered agent, or both, in the State of Florida.				
1. The name of	the corporation: Camerino International Corp.				
	office address: 2780 NE 183RD STREET # 1006, AVENTURA, FL 33160				
3. The mailing a	address (if different): 16 Springtree Lane Yardley PA 19067				
4. Date of incor	poration/qualification: 1/6/2010 Document number: P1000001328				
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)				
	GBS CONSULTANTS, INC.				
	18501 PINES BOULEVARD, SUITE 201				
	PEMBROKE PINES FL 33029 US				
6. The name and (if changed):	PEMBROKE PINES FL 33029 US Street address of the new registered agent (if changed) and /or registered office with the company of the new registered agent (if changed) and /or registered office with the company of the new registered agent (if changed) and /or registered office with the company of the new registered agent (if changed) and /or registered office with the company of the new registered agent (if changed) and /or registered office with the company of the new registered agent (if changed) and /or registered office with the company of the new registered agent (if changed) and /or registered office with the company of the new registered agent (if changed) and /or registered office with the company of the new registered agent (if changed) and /or registered office with the company of the new registered agent (if changed) and /or registered office with the company of the new registered agent (if changed) and /or registered office with the company of the company				
	Karem Alsina				
	2780 NE 183RD STREET # 1006, AVENTURA, FL 33160				
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.				
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.				
dan	Karem Alsina Secretary/Treasurer He of an object or director Karem Alsina Secretary/Treasurer				
I hereby accept I further agree of my duties, an document is be corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed marely to reflect a change in the registered office address, I hereby confirm that the s been not fred in writing of this change.				
Sig	pature of Registed Agent B-11-10 Date				
{ .	chalf of an entity:				
Т	yped or Printed Name				

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