

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL .
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
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COVER LETTER

то:	Amendment Section Division of Corporations
CUDI	Palmetto Bay Drive Thru, Inc.
SORI	ECT:Name of Corporation
DOCU	P17000017264 UMENT NUMBER:
	aclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
	return all correspondence concerning this matter to the following:
	Zuhair Karborani
	Name of Contact Person
	Firm/Company
	13655 Old Cutler Road
	Address
	Palmetto Bay, Florida 33158
	City/State and Zip Code
	mkarborani@aol.com
	E-mail address: (to be used for future annual report notification)
	rther information concerning this matter, please call:
Zuna	ir Karborani 305 498-9054 at ()
	Name of Contact Person at (
Enclos	sed 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

Pursuant to the	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 of $\frac{Florida}{Florida}$	
in orde	er to change its registered office or registered agent, or both, in the State of Florida.	
	Palmetto Bay Drive Thru Inc	
	the corporation:	
2. The principal office address: Palmetto Bay, Florida 33158		
3. The mailing	address (if different):	
4. Date of incor	poration/qualification: Document number: P17000017264	
5. The name an	d street address of the current registered agent and registered office on file with the trument of State: (If resigned, enter resigned)	
•	Zuhair Karborani	
	16767 Old Cutler Road	
	Palmetto Bay, Florida 33157	
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered office	
	Zuhair Karborani	
	13655 Old Cutler Road	
	P.O. Box NOT acceptable Palmetto Bay, Florida 33158	
The street addr	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change w authorized by t	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.	
Silgnar	2 whair Karburani/President	
I hereby accept I further agree performance of agent. Or, if the hereby confirm	t 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 f my duties, and I am familiar with and accept the obligation of my position as registered his document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
	3/2/2017	
	gnature of Registered Agent Date	
∕u signing on be	chalf of an entity:	
	yped or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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