## P20341

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000237470410

07/16/12--01055--008 \*\*35.00

12 JUL 16 AM 9: 03
SEURETARY OF STATE
STURETARY OF STATE

Pachange 07-23-12 Do

## COVER LETTER

**TO:** Amendment Section Division of Corporations

SUBJECT: PALMIRA CORPORATION

Name of Corporation

OCCUMENT NUMBER: P2034

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

Please return all correspondence concerning this matter to the following:

PHYLLIS SHERRY

Name of Contact Person

FREUND KATZ GOLDSTON YOUNG & CO PA

Firm/Company

210 N UNIVERSITY DR, STE 302

Address

CORAL SPRINGS, FL 33071

City/State and Zip Code

psherry@tax-doctor.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PHYLLIS SHERRY

,954 \345-8

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed 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

CR2E045 (03/12)

## 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 DELAWARE	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: PALMIRA CORPORATION	
2. The principal office address: 104 EAGLETON LANE	
PALM BEACH GARDENS, FL 33418	
3. The mailing address (if different): 210 N UNIVERSITY DR, STE 302	
CORAL SPRINGS, FL 33071	
4. Date of incorporation/qualification: 08/04/1988 Document number: P20341	
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)	
JON POULOS	
104 EAGLETON LANE	
PALM BEACH GARDENS, FL 33418	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	ļ
PHYLLIS SHERRY 3	
210 N UNIVERSITY DR, STE 302	
P.O. Box NOT acceptable	
CORAL SPRINGS, FL 33071	
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, on the corporation has been notified in writing of the change.	
WALTER PROBST, PD 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.	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
PHYLLIS SHERRY	
Typed 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 \* \* \*