## CASINO LIMOUSINES, INC. 8554 SW 129 Terrace MIAMI, FL 33156

City/State/Zip

Phone #

Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.	
(Corporation Name)	(Document #)
Corporation Name)	(Document#) 300006125123-4 *****35.00 *****35.00
(Corporation Name)	(Document#)
4(Corporation Name)  Walk in Pick up time	(Document #)  Certified Copy
☐ Mail out ☐ Will wait	Photocopy Certificate of Status
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other  OTHER FILINGS  Annual Report Fictitious Name	AMENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger  REGISTRATION/QUALIFICATION Foreign Limited Partnership
Trichious Ivanie	Reinstatement Trademark Other  Examiner's Initials

CR2E031(7/97)

Exam

Examiner's initials

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

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P.O. Box 6327

TALLAHASSEE, FL 32314

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DIVISION OF CORPORATIONS