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EXAMINER

COVER LETTER

Division of Corporations		
SUBJECT: Korina Investments Ltd	d	
	me of Alien Business Organization)	-
Dear Sir or Madam:		
The enclosed Designation of Registered are submitted for filing.	Agent and Registered Office for Alien Business Organiz	ation and fee(s)
Please return all correspondence concerr	ning this matter to the following:	
Jean-Charles Dibbs, Esq. (Name of Person)	· 	
Shutts & Bowen LLP	· ·	
(Firm/Company)	300	2009 FEB SECRETALLAHA
201 S. Biscayne Blvd., Suite 15 (Address)	: :	19 SSE
Miami, FL 33131 (City/State and Zip Cod	le)	AM IO: 36 OF STATE E. FLORIDA
For further information concerning this	matter, please call:	
Jean-Charles Dibbs, Esq. (Name of Person)	at (305) 379-9192 (Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following	amount:	
\$35.00 Filing Fee	\$43.75 Filing Fee & Certified Copy	

DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO DESIGNATE ITS REGISTERED AGENT AND REGISTERED OFFICE IN THE STATE OF FLORIDA:

1. Korina Investments Ltd.	
(Name of alien business orga	nization)
2. British Virgin Islands (State or country under which entity is organized)	3(FEI Number, if applicable)
(State of county these which chary is organized)	(PET Number, if applicable)
4. c/o Jean-Charles Dibbs, Esq., Shutts & Bowen LLP, 201 S. E	
5. Name and Florida Street address of registered agent.	
Corporation Company of Miami	
201 S. Biscayne Blvd., Suite 1500 (JCD)
Miami, FL 33131	
6. The street address of the registered office and the street address are identical. 7. (Signature of chairman, vice chairman)	CRETARY Onan, or officer)
8. KAY-LINDA RICHARDSON Diet (Name and capacity of person signing i	n number 7 above)
9. Signature of registered agent:	NTE 36
I hereby accept the appointment as registered agent. I am fam 607.0505, Florida Statutes.	iliar with and accept the obligations of section
<u> Alm</u>	02/18/09
(Registered agent accepting appointment)	(Date)
Cavell J. Anderson, Asst. Secretary	

THE FILING OF THIS ALIEN BUSINESS ORGANIZATION FORM WITH THE FLORIDA DEPARTMENT OF STATE DOES NOT AUTHORIZE THE ABOVE REFERENCED ENTITY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

FILING FEE \$35

Make checks payable to Florida Department of State and mail to: Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

INHS24 (08/05)