## Q110000000000

. <del>.</del> (R	equestor's Name)				
(A	ddress)				
· (A	ddress)				
	ity/State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
· (B	usiness Entity Name)				
(D	ocument Number)				
Certified Copies Certificates of Status					
Special Instructions to	Filing Officer:				
· , .					

Office Use Only



500211785255

09/12/11--01008--009 \*\*35.00

11 SEP 12 AM IO: IC SECRETARY OF STATE NIT AMASSEF: FLORION

J. BRYAN

SEP 1 4 2011

**EXAMINER** 

## **COVER LETTER**

Registration Section Division of Corporations BJECT: HALIBUT MANAGEMENT CORP. (Name of Alien Business Organization) Dear Sir or Madam: Fhe enclosed Designation of Registered Agent and Registered Office for Alien Business Organization and fee(s) are, submitted for filing. e return all correspondence concerning this matter to the following: BETSY PARENTI, PARALEGAL (Name of Person) OWLER RODRIGUEZ VALDES-FAULI (Firm/Company) 5 ALHAMBRA CIRCLE, SUITE 801 (Address) CORAL GABLES, FL 33134 (City/State and Zip Code) figurther information concerning this matter, please call: Y PARENTI (Area Code & Daytime Telephone Number) (Name of Person) STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 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 HALIBUT MANAGEMEN						
	(Name of alien	business organization)				
DDITICU MDOINICL	MDC	- N/A				
BRITISH VIRGIN ISLA		3. <u>N/A</u>	(FEI Number, i	6 12 . 3 1.5		
State or country under	r which entity is organized)		(PEI Number,	i applicable)		
	n1 a		m1-	Dani bi ab	3.F. d. amouril an	Talaad
4 124c/o Vanterpool	Plaza, Second Flo	al office address)	Tortola,	British	virgin	1 ISIANO
	(rincipa	at office address)			产品	
S. Name and Florida Street	address of registered agent	1			52	公司
		•			王二	~
	REGISTERED AGENT C	ORPORATE SERVIC	ES INC.		SE	2 1
N. T.					<u> </u>	72 [
ari.	355 ALHAMBRA CIRCLE,	SUITE 801			무무	野京一
					200	Ġ,
Marian Marian	CORAL GABLES, FL 331	34			97	مسيد الله المانية الله
					<u> </u>	•
	registered office and the str	reet address of the bus	siness office o	of the registe	red agent	,
are identical.						
7.7	1. 1.					
	// (Signature of chairm	an, vice chairman, or offi	cer)			
	[//					
8.2.5	Sole Director - S	imiliano Garcia	a Cottone			
	(Name and capacity of po	erson signing in number 7	above)			
9. Signature of registered a	gent:					
I hereby accept the appoin	ilment as registered agent	. I am familiar with	n and accept	the obligati	ons of se	ection
607.0505, Florida Statutes.						
REGISTERED AGENT CO	RPORATE SERVICES,	INC.				
	,					
12tal			Septemb	per 9, 20	ווו	
(Registered agent acce				(Date)		
Betsy Parenti, As	sistant Secretary					
THE FILING OF TH	IS ALJEN RUSINESS	ORGANIZATION	FORM V	VITH THE	E FLOR	AUIS

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