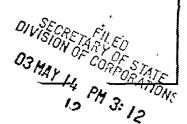
G86889



(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



300017925453

##35.00 **35.00

RA address Chy.

DIVISION OF CORPORATIONS 03 MAY 14 PM 3: 12

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
ρ .
SUBJECT: COSC INESTERNATION [Name of corporation)
DOCUMENT NUMBER: G 86889
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:
MACTOR L. LEVEL (Name of person)
REVER Singerconnect Thrompsommer Inc. (Name of firm/company)
201 AMANARA CIRCLE, Supra 900
(City/state and zip code)
For further information concerning this matter, please call:
Marcon Li Neve at (305) 507-1888 x 204 (Name of person) at (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 409 E. Gaines Street Tallahassee, FL 32319

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
holo in order to change its registered office or registered agent, or both, in the State
of Florida.
1. The name of the corporation: Leve Investment Internation Inchestion Inchestion
2. The principal office address: 201 Kuthamos (12cus Sura 900 14)
COLL GOS-55, FL 33134 - 94 305
3. The mailing address (if different): Some
10 ms
4. Date of incorporation/qualification: 1984 Document number: 68688
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
MARGE Li JONELL
800 Poveras Groce Anon Burene Dies 250
Collinary fr. 33139
6. The name and street address of the new registered agent (if changed) and /or registered office (if
changed): Lavou
201 AHAMSEN CIPLLE LATE POS
(P.O. Box or personal mailbox NOT acceptable)
Carre Corper, PC 33134
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, or the corporation has been notified in writing of the change.
(Signature or an object, chairman or vice chairman of the board) (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.
Mary 12 2003
(Signature of Registered Agent) (Date)
If signing on behalf of an entity: Where L. Lavau Granton & CCO
(Typed or Printed Name) (Capacity)

ū.

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