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2005 DEC 27 P 2: 19



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COVER LETTER

33.2	
TO: Registration Section Division of Corporations	FILED
Division of Corporations	
SUBJECT: 1055 NE 125, L.L.C.	2005 DEC 27 P 2:
	ed Liability Company) TALE TARY OF
`	ed Liability Company) TALLAHASSEE, FLORID
Dear Sir or Madam:	- CON)[
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	natter to the following:
Michael I Bernstein	
(Name of Person)	
Michael I Bernstein, P.A.	
(Firm/Company)	
1680 Michigan Ave, Suite 736	
(Address)	
Miami Beach, FL 33139	
(City/State and Zip Code)	
For further information concerning this matter, pl	ease call:
,,	
Michael I Bernsteinat (305 672-9544
(Name of Person)	(Area Code & Daytime Telephone Number)
,	• • • • • • • • • • • • • • • • • • • •
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	rananassee, Fiorida 32314
Enclosed is a check for the following an	nount:
\$25 Filing Fee	S55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limite	ed liability company is: 10	955 NE 125, L.L.C.	
	f the limited liability comp		2005 NEC 27 P.2: 1
Surfside, FL 33154			SECRETARY OF STATE TALLAHASSEE, FLORIDA
6/29/2004	 ,	L04000048972	THE SEE FLORIDA
3. Date of filing/registrat	ion in Florida	4. Document number	r
5. The name of the register Florida Department of		ed office address as shown on	the records of the
-	Joshua Manaster, ESt	Q	
	N	ame	
	1428 Brickell Ave. Eight	h Floor	
	Ad	dress	
	Miami, FL 33131		•
	City, Sta	ite and Zip	
6. The name and address	of the new registered agen	t and/or office:	
	Michael I Bernstein, P.A	1.	
	Nar 1680 Michigan Ave, Suit		
	Florida street address (P	O. Box NOT acceptable)	ि नर्ने रेक्ट
	Miami Beach,	<u>L</u> 33139	
	City, State	e and Zip	
confirmed that after the c	hange or changes are made	der the laws of the State of Flore, the Florida street address of	the registered office

onfirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(Signature of a member or authorized representative of a member)

SHAVLSON

(Printed or typed name of signee)

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 obligations of my position as registered agent as provided for in Chapter 698, F.S. On if this document is being filed to merely reflect a change in the registered office address, Thereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)