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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MERRICK CLEANERS, LLC (Name of Limited Liability Company)	
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Bart H. Chepenik (Name of Person)	
Givner Jaroslawicz & Chepenik (Firm/Company)	
1177 Kane Concourse, Suite 232 (Address)	
Bay Harbor Islands, Florida 33154 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Bart H. Chepenik at (305) 867-6470 (Name of Person) (Area Code & Daytime Telephone Number	•)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother 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:	

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

Pursuant to the provision liability company submit agent, or both, in the State	ts the following staten	l6 or t nent in	608.508, Florida Statutes order to change its regi	i, the under stered offic	rsigne e or i	ed li regis	mited tered
1. The name of the limit	ed liability company is	s: ME	RRICK CLEANERS, L	.LC			·
2. The mailing address o	f the limited liability	compan	y is : 700 Biltmore W	/ay, Suite	619	}	
Coral Gables, FL 33							
Oct 15 2004			L0400007511	7			
3. Date of filing/registrat	ion in Florida		4. Document num	nber			
5. The name of the registe Florida Department of	State:			on the recor	ds of	the	
	Robert I. Finv	<u>arb,</u> Nam		ALL	SEL	<u>S</u>	
	1065 Kane Co		rse, Suite 201	AHAS		NOV -7	T1 ====================================
	Bay Harbor Isla City	ands, , State	Florida 33154 and Zip	11. 12. 13.	<u> </u>	里	E D
6. The name and address	of the new registered	agent a	nd/or office:	LOSI	STATE	င်္ဘ င်္ဘ	O
	Roland Haiek	\ -		DA	ш, ,	C)1	
	700 Biltmore W						
		•					
	Coral Gables City.	FL State a	33134 nd Zip				
of the limited liability consormed that after the cland the business office of iability company, it is here of the members of the limber the operating agreement	nange or changes are read the registered agent were the registered agent were that the company of the limited liability of the limited liability.	made, to the interpolation of the contract of the contract of the company of the	he Florida street address dentical. Or, in the case ge(s) was/were authorized otherwise provided in the	of the regist of a Florida d by an affir	tered (Limit rmativ	offic ted ve vo	ote
Signature of a member or author	ized representative of a memi	ber)					
Roland Haiek Printed or typed name of signee)							
I hereby accept the appoinments with the provision and I am familiar with an Chapter 608, F.S. Or, if the ladress, I hereby confirm	intment as registered a s of all statutes relatived d accept the obligation his document is being that the limited liabil	agent a ve to th ns of m filed to ity com	nd agree to act in this ca e proper and complete pe y position as registered a nerely reflect a change pany has been notified in	pacity. I fur erformance igent as pro in the regis writing of	rther of my videa terea this c	agre duti l for l offic hang	e to les, in ce ge.
Signature of Resistered Agent)							

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00