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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: EDP 542 LLC			
(Name of Corporation)			
1			
DOCUMENT NUMBER: 40400080424			
The enclosed Statement of Change of Registered Office/Ager Please return all correspondence concerning this matter to the	following:		
Edward D. Pascoe (Name of Contact Person)			
(Name of Contact Person))		
FOP 542 LLC			
(Firm/Company)			
1			
1871 M.W. Morth River Dri	ve		
	_		
Miami, Florida 33125 (City/State and Zip Code)			
(City/State and Zip Code))		
For further information concerning this matter, please call: at	() <u>Zg</u>	90	
Fd = 100		06 JUL 18	
Kdward O, Pasce 305-32 (Name of Contact Person) (Area C	0de & Daytime Telephone Number)		
(Manie of Contact Ferson)	ode & Daytime Telephone Hambery	8	
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Enclosed is a \$35.00 check made payable to the Department of	of State.	$\dot{\mathcal{W}}$	
Malling Address Street Address	2号	10	
Mailing Address: Street Address: Amendment Section	Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle		
•••••	Tallahassee, FL 32301		

STATEMENT OF CHANGE OF REGISTERED OFFICE FOR LIMITED LIABILITY COMPANY

This statement of change is submitted for a limited liability company organized under the laws of the State of Florida in order to change its registered office in the State of Florida.

1. The name of the Limited Liability Company: EDP 542 LLC			
2. The principal office address: 1871 N.W. North River Orive, (previously 253 Sw. 23 Ave Miami, Fl. 33135) 3. The mailing address (if different):	Miani, F	٦.3	13125
4. Date of information: JUNE 39 2006 Document number: L0400080424			
5. The street address and mailing address of the new registered office:			
(P.O. Box NOT acceptable) Ruck Orice, Miani, Fl. 33125		06	
Such change was authorized by resolution duly adopted by its Managing Member.			
Signature of an officer or director) Edward D. Pascoe M. (Printed or typed in the control of typed in	ave and title)	YES	
	STATE	2:	

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)