L05000047578

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07 AUG -6 PM 2:42

TO:

Registration Section **Division of Corporations**

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:

For further information concerning this matter, please call:

at (501) 392-8920 (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center 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:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy



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07 AUG -6 AM 9: 24

SECRETARY OF STATE TALLAHASSEE, FLORIDA

July 27, 2007

JAMES BATMASIAN INVESTMENT LIMITED 215 FEDERAL HWY - # 1 BOCA RATON, FL 33433

SUBJECT: 2500 NW 2ND LLC Ref. Number: W07000036350

We have received your document for 2500 NW 2ND LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Document Specialist
Registration/Qualification Section

Letter Number: 007A00046966

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 limited liability company is: 2500 NW 2nd, LLC		
2. The mailing address of the limited liability company is: 215 N. FEDERAL SUITE 1, BOCA RATON, FINICIA 33432	1+1	NY.
10/03:05 LU5000975 3. Date of filing/registration in Florida 4. Document number	<u> 18</u>	
5. The name of the registered agent and the registered office address as shown on the records Florida Department of State: Bloch, Stuart E, ESq. Name 980 N. Federal Hwy # 412 Address Boca 2400, Florida 33432 City, State and Zip	of th	e DIVI
5. The name and address of the new registered agent and/or office: Tames Batmasian 215 N. Featral Hwy # 1 Florida street address (P.O. Box NOT acceptable) Boca Paton FL 334-32 City, State and Zip	7 AUG -6 PM 2: 42	FILED SECRETARY OF STATE ISION OF CORPORATIONS
If the limited liability company is not organized under the laws of the State of Florida, it is he confirmed that after the change or changes are made, the Florida street address of the register and the business office of the registered agent will be identical. Or, in the case of a Florida liability company, it is hereby confirmed that the change(s) was/were authorized by an affirm of the members of the limited liability company or as otherwise provided in the articles of cor the operating agreement of the limited liability company. (Signature of a member of authorized representative of a member)	red of limited native	ffice d vote
(Printed or typed name of signee) I hereby accept the appointment as registered agent and agree to act in this capacity. I furnicomply with the provisions of all statutes relative to the proper and complete performance of and I am familiar with and accept the obligations of my position as registered agent as providing the control of	ther a f my d ided f ered c his ch	gree to luties, 'or in office ange.
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00		