

L06000022478

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

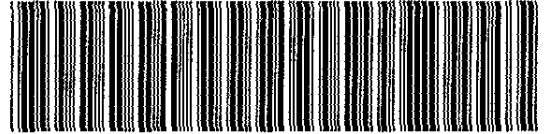
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800067772808

08/16/06 01048 -011 \*\*35.00

*Wm/06/06*

**FILED**  
06 APR -5 PM 3:58  
SEALING OFFICE OF STATE  
TALLAHASSEE, FLORIDA

*Sp*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** X Visual Arts LLC

**DOCUMENT NUMBER:** L06000022478

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Laura Gomez  
(Name of Contact Person)

X Visual Arts LLC  
(Firm/ Company)

2001 Biscayne Blvd, Apt 3313  
(Address)

Miami, Florida 33137  
(City/ State and Zip Code)

**FILED**  
06 APR -5 PM 3:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Laura Gomez at ( 786 ) 521 9888  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|---|---|--|--|

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** x Visual Arts  
(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:

Laura Gomez  
(Name of Person)

x visual arts  
(Firm/Company)

2001 Biscayne Blvd. Suite 3313  
(Address)

miami - florida 33137  
(City/State and Zip Code)

For further information concerning this matter, please call:

Laura Gomez at (786) 521 9888  
(Name of Person) (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

06 APR -5 PM 3:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 28, 2006

LAURA GOMEZ  
X VISUAL ARTS LLC  
2001 BISCAYNE BLVD, APT 3313  
MIAMI, FL 33137

SUBJECT: X VISUAL ARTS LLC  
Ref. Number: L06000022478

We have received your document for X VISUAL ARTS LLC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$15.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a corporation, but your entity is an LLC. Enclosed are the two forms for making the changes you would like to make to your LLC.

Please return 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) 245-6958.

Lee Rivers  
Document Specialist

Letter Number: 906A00020928

FILED  
06 APR -5 PM 3:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: Visual arts

2. The mailing address of the limited liability company is: 2001 Biscayne Blvd. apt. 3313 Miami, Florida 33137

3. Date of filing/registration in Florida 03/02/2006

4. Document number L06000022478

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Laura Gómez  
Name

2001 Biscayne Blvd suite 3313  
Address

miami / Florida 33137  
City, State and Zip

6. The name and address of the new registered agent and/or office:

Ricardo De castro  
Name

2001 Biscayne Blvd Suite 3313  
Florida street address (P.O. Box NOT acceptable)

Miami FL 33137  
City, State and Zip

FILED  
06 APR -5 PM 3:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed 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]  
(Signature of a member or authorized representative of a member)

Laura Gomez  
(Printed or typed name of signer)

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 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Ricardo De Castro  
(Signature of Registered Agent)

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