L-10000122/40

(Re	equestor's Name)		
(Ad	ldress)		
•			
(Address)			
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	MAIT	MAIL	
(Business Entity Name)			
. (Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			
	, ming Simoon.		
	_		
	Α.	LUNT	
	JAN	20 2011	
	EXA	MINER	

Office Use Only



600218613436

01/19/12--01011--007 **100.00

2012 JAN 19 PH LE LO

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.

Name of the limited liability company:Optimu	us US 1655 W. 44th Pl., L.L.C.
2. (a) Principal office address of limited liability company	: 11601 Biscayne Blvd.
(Note: MUST BE STREET ADDRESS)	Unit 3204 Miami, FL 33184
(b) Mailing address of limited liability company:	11601 Biscayne Blvd.
(Note: MAY BE POST OFFICE BOX)	Unit 3204 Miami, FL 33184
11-24-10	L10000122140
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	CT Corporation System
Registered Office Address: (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	1200 S. Pine Island Rd. Part State Plantation, FL 33324
NEW Registered Agent:	Carlos Castro
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	c/o Castro & Ramirez P.A. 1805 Ponce de Leon Blvd:, #500 Coral Gables ,FL33134
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identic liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company. OPTIMUS US PROPERTIES HOLDINGS, L.L.C. Signature of a member or athorized representative of a member	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of organization
BY: RONAN GUILFOYLE, ITS MANAGER	
Printed or typed name of signee I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F,S. Or, if this document is being filed to mercaddress, I hereby confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.

Signature of Registered Agent

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.	Name of the limited liability company: Optimus US 1655 W. 44th Pl., L.L.C.		
2.	(a) Principal office address of limited liability compar	y: 11601 Biscayne Blvd.	
	(Note: MUST BE STREET ADDRESS)	Unit 3204 Miami, FL 33184	
	(b) Mailing address of limited liability company:	11601 Biscayne Blvd.	
	(Note: MAY BE POST OFFICE BOX)	Unit 3204 Miami, FL 33184	
	11-24-10	L10000122140	
3.	Date of filing/registration in Florida	4. Document number	
5.	(a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
	Registered Agent:	CT Corporation System 🔀 😩	
	Registered Office Address:	1200 S. Pine Island Rd.	
•	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:	
	NEW Registered Agent:	Carlos Castro	
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	c/o Castro & Ramirez P.A. 1805 Ponce de Leon Blvd. #500 Coral Gables FL33134	

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 accompany or appropriate authorized by the limited liability company. or the operating agreement of the limited liability company.

OPTIMUS US PROPERTIES HOLDINGS, L.L.C.

Signature of a member or authorized representative of a member

BY: RONAN GUILFOYLE, ITS MANAGER

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 608, F.S. Or, 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

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

INHS18 (05/08)