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My Co

FF \$25

Jennifer C. Finch

Tel: (386) 462-9085

504 Turkey Creek
Alachua, Florida 32615

E-mail: Hypatia59@aol.com

December 28, 2002

Florida Department of State
Division of Corporations

LLC Section
409 E. Gaines St.

Tallahassee, FL 32399

Dear Sir/Madam:

Enclosed please find documents and filing fees for the following.

RR SERVICES, L.L.C.:

- Amendment to Articles of Organization & \$25.00 fee
- Certified Copy Fee \$8.75
- Certificate of Status Fee \$5.00
- Certified Copy Fee \$8.75

REGISTERED OFFICE CHANGES WITH \$25.00 FEES FOR:

- CIC International, LLC
- ROM International, LLC
- RRH Marketing, LLC
- SIC International, LLC
- SVI International, LLC

REGISTERED OFFICE AND REGISTERED AGENT CHANGE WITH \$25.00 FEE FOR:

• Essen Marketing, LLC

Please call me at the number on the letterhead if you need anything further.

Thank you!

Jenrafer C. Finch

Kindest regards,

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 limit	ed liability company is:	ESSEN	MARKETING,	L.L.C.		٠.,
2. The mailing address o		-	4 4 6 6 6	Commerc	ial Blvd.	
z. zao zaming auditos o			Suite 2	02_		1. -
09/07/199	9		11-4-m-14	derdale,	FL 33309	_•
3. Date of filing/registrat	tion in Florida		4. Document	number		-
5. The name of the regist Florida Department of	State:	ered office		wn on the rec	ords of the	
			Ave, Ste.	1 3-	1	
		Address	ET 22121		TÍ ra	
	City,	State and Z	FL 33134 ip			
6. The name and address					92 ren 39 31 habas	
	Raul Ri	o, C.P.	A.	; =	30	: التي پخس د
	3363 Commerci	ame aL Blvd	., Ste. 20	2	5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5	
	Florida street address	(P.O. Box	NOT acceptabl	e)	2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	
	Ft. Lauderdale	3	3309	(ن ٠
	City, St	ate and Zip	·			
If the limited liability conconfirmed that after the cand the business office of liability company, it is he the members of the limite the operating agreement of	hange or changes are ma the registered agent will reby confirmed that the d liability company or a	ide, the Flo I be identic change(s) v is otherwise	rida street addre al. Or, in the ca vas/were author	ess of the regi use of a Florid ized by an af	istered office da limited firmative vote o	f

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 auties, 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.

(Signature of Registered Agent) Rajul R10, C.P.A.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FÉE: \$25.00

INHS18(10/99)