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SECRETARY OF STATE

2/8/08

COVER LETTER

TO: Amendment Section Division of Corporations		· · · · · · · · · · · · · · · · · · ·	· • ·
SUBJECT: LINPR	(Name of Corporati	on)	
DOCUMENT NUMBER:	P070000	060195	
The enclosed Statement of Change of R	egistered Office/Agent	and fee are submitted for fil	ling.
Please return all correspondence concern	ning this matter to the	following:	·
Ren	(Name of Contact Pe	rson)	
, .>	(Firm/Company))	
10835	SW 1	12th Ave	Apt #102
Miami	FL (City/State and Zip C	33176	_
For further information concerning this		and the second	
Rener Nalia (Name of Contact Person	·) Area Code & Daytime Telep	phone Number)
Enclosed is a \$35.00 check made payab	e to the Department of	State.	
Form the application of the graph			
Mailing Addre Amendment So Division of Co P.O. Box 6327 Tallahassee, F	orporations	Street Address: Amendment Section Division of Corporation Clifton Building 2661 Executive Center	
		Tallahassee, FL 32301	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

The transfer of the transfer of the second

Pursuant to the provisions of						tutes, this		4
statement of change is submitted in order to change it.		_		•	-	ida	_	
The name of the corporation	1	·IU bu		γρ.	orano og 1 ror	,		
2. The principal office address		335	Sw	11244	Ave	Apt	#	102
MIAMI	FL.	33176	·					
3. The mailing address (if diff	erent): 10	835	SW	112th	Are	Apt	#1	02
Miar	ni fl	- , 33	176			•		
4. Date of incorporation/qualit	fication: M	47212	Docur	nent number:	Po-	70000	o 60	<u> </u>
5. The name and street address Florida Department of State		nt registered a	agent and reg	istered office	on file with t	he		
R	enee 1	Jalia		valle				
<u></u> (વ	008	Park	Rid	3e S	===== ST	یہ	1	
Wes	`	fL	3333	2		TALL!		n _
6. The name and street address (if changed):		egistered age	` .	d) and /or regi	stered office	HASSEE, F	3-4 PH 12	ED
108	35	Sω	112	m Ave	Apt.	102	. 22	
_M	ia Mi	x NOT acceptable	33 1	76		·		
The street address of its regis as changed will be identical.	stered office a	and the street	t address of t	he business o	ffice of its re	egistered ag	ent,	
Such change was authorized authorized by the board, or the	by resolution ne corporation	duly adopten has been no	ed by its boar otified in wr	rd of directors	or by an off	ficer so		
•	• .			Rene	e Na	lia E	Va	lle
(Signature of an officer or	•				d name and title)	ï	,	
I hereby accept the appointm I further agree to comply witt of my duties, and I am familia document is being filed mere corporation has been notified	ent as registe h the provision ar with and a ly to reflect a lin writing o	ered agent arons of all states of all states of all states of the object the object of this change of this change	nd agree to d tutes relative ligation of m he registered	ict in this capt to the propei ty position as I office addres	acity. r and compli registered a ss, I hereby c	ete performe gent: Or, if confirm that	ance this the	
(Signature of Register	red Agent)			(Dat	te)			
If signing on behalf of an ent	ity:		:					
(Typed or Printed N	ame)							_

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