KRAMER, GREEN, etal Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

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From:

Account Name

: KRAMER, GREEN, ZUCKERMAN & KAHN, P.A.

Account Number : 073707002173

Phone Fax Number : (954)966-2112 : (954)981-1605

## REGISTERED AGENT CHANGE

11 CORPORATION, INC.

Certificate of Status	0
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the	e provisions of sections 60%	7.0502, 617.0502, 6	07.1508, or 617.1508, Florida Statutes,	
the undersigned submits the foll the State of Floi		er the laws of the St change its register	ate ofed office or registered agent, or both, in	
-	the corporation: 11 CC	RPORATION, INC.		_
		<u> </u>		_
2. The mailing	address of the corporation:		hern Blvd. Im Beach, FL 33405	_
3. Date of inco	rporation/qualification:	2/09/85	Document number: H89669	
	id address of the current reg	stered agent and off	ice:	
	Richard L. Marte	<b>.</b>		
	515 N. Flagler D	rive, 19th Floor	TASE 00	
	West Palm Beach,	-	LG NOV	
5. The name ar	nd address of the new register (P. C	med agent (if change ). Box Not Acceptal	d) and/or registered office (if changes):	
	Robert M. Kramer		<u> </u>	
	4000 Hollywood B	lvd., Suite 485	South South	
	Hollywood, FL 33	021	DA DA	
The street addingent, as change	ress of its registered office ged, will be prentical.	and the street addre	ss of the business office of its registered	
Such change wanthorized by	vas authorized by resolution	duly adopted by it	s board of directors or by an officer so	
-	4XVX	Paus	<u> </u>	
(Signature	e of an officer, casiman or vice cha	fman of the board)	(Date)	
LEON C	. PULTS, President	•		
	(Printed or typed name and i	itle)	C C. A. A L	
Having been n corporation, I I further agree performatice to	named as registered agent of hereby accept the appoints to comply with the provisi of my duties, and Lam famil	nd to accept service nent as registered a ons of all statutes re iar with and accept	e of process for the above stated gent and agree to act in this capacity. elative to the proper and complete the obligation of my position as	
registered age	John. Kraner	/	Nov. 22, 2000	
	(Signature of Registered Agent)		(Date)	
If signing on beh ROBERT M			President	
WOLKT M	(Typed or Printed Name)		(Capacity)	
	***F	ILING FEE: \$35.0	0 * * *	
CR2E045(9/00)		B.O. Dec. (2007)	Taliahassee, FL 32314	
	DIVISION OF CORPORATIONS	P.O. Box 6327	TWINDHOUSE, I'M 36314	