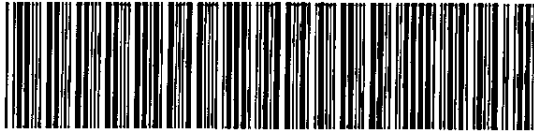


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

July 13, 2005

DAMIAN DIAZ
6955 NW 77 AVENUE, STE. 206
MIAMI, FL 33166

SUBJECT: NORTH AMERICAN TRANSPORT SERVICES. LLC
Ref. Number: L04000035503

We have received your document for NORTH AMERICAN TRANSPORT SERVICES. LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6890.

Jason Merrick
Document Specialist

Letter Number: 005A00046269

SECRET
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NORTH AMERICAN TRANSPORT SERVICES LLC
(Name of corporation)

DOCUMENT NUMBER: L04000035503

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

DAMIAN DIAZ
(Name of contact person)

NORTH AMERICAN TRANSPORT SERVICES, LLC
(Firm/Company)

6955 NW 77 AVENUE, SUITE 206
(Address)

MIAMI, FL 33166
(City/state and zip code)

For further information concerning this matter, please call:

DAMIAN DIAZ at (305) 805-9400
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

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

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

05 AUG 8 AM 10:32
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: NORTH AMERICAN TRANSPORT SERVICES,
2. The mailing address of the limited liability company is : 6955 NW 77 AVENUE, SUITE 206
MIAMI, FL 33166

- MAY 10, 2004 L04000035503
3. Date of filing/registration in Florida 4. Document number

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

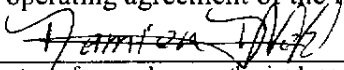
LINCOLN FONTANILLS
Name
10000 WEST BAY HARBOR DRIVE, SUITE 3
Address
BAY HARBOR ISLANDS, FL 33154
City, State and Zip

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

LINCOLN FONTANILLS
Name
6955 NW 77 AVE, SUITE 206
Florida street address (P.O. Box NOT acceptable)
MIAMI, FL 33166
City, State and Zip


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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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 of a member or authorized representative of a member)

DAMIAN DIAZ
(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, I hereby confirm that the limited liability company has been notified in writing of this change.


(Signature of Registered Agent)

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