## L07000054283

| John Arrasi<br>1110 Brickel<br>Miami, FL 3 | ll Ave., #403     |                 |
|--|-------------------|-----------------|
| (Ad  | dress)            |                 |
| (Cit                                       | y/State/Zip/Phone | <del>= #)</del> |
| PICK-UP                                    | WAIT              | MAIL            |
| (Bu  | siness Entity Nan | ne)             |
| (Do  | cument Number)    | <del></del>     |
| Certified Copies                           | _ Certificates    | of Status       |
| Special Instructions to Filing Officer:    |                   |                 |
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Office Use Only



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SECRETARY OF STATE
SECRETARY OF STATE

## 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: <u>ECOLAN</u>  | VATION HOLDING COMPANY, LLC   |
|--|---|
| 2. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)   | nany: 15715 SOUTH DIXIE HIGHWAY SUITE 402 MIAMI, FL 33157   |
| (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)   | 15715 SOUTH DIXIE HIGHWAY<br>SUITE 402 P. 8<br>MIAMI, FL 33157 F. 8   |
|  | APR 2   |
| 5/22/07  | L07000054283  |
| 3. Date of filing/registration in Florida  | 4. Document number  |
| 5. (a) Registered Agent and Registered Office shown Registered Agent:  | on the records of the Florida Dept. of States 7   |
| Registered Agent:  | CFRA, LLC   |
| Registered Office Address:   | 4221 WBOYSCOUT BOULEVARD<br>10TH FLOOR<br>TAMPA, FL 336007  |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:  | NEW Registered Office address:  JOHN ARRASTIA JR.   |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)  | 1110 BRICKELL AVENUE<br>SUITE 403<br>MIAMI, FL 33131  |
| If the limited liability company is not organized under that after the change or changes are made, the Florida st office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorize liability company or as otherwise provided in the article limited liability company.                           | reet address of the registered office and the business e case of a Florida limited liability company, it is |
| (Signature of a member or authorized representative of a member)  (Printed or typed name of signee)  | - Arriva  |
| I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my positions. Or, if this document is being filed to merely reflect confirm that the limited liability company has been noting that the limited liability company has been noting. |   |
| Division of Corporations, P.O. B   | ox 6327, Tallahassee, FL 32314  |

**FILING FEE: \$25.00**