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SECRETARY OF STATE DIVISION OF CORPORATIONS

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TO: Registration Section
Division of Corporations

SUBJECT: Coda blue II LC (Dissolutioned)
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Vincent Carrodeguas
Name of Person

Goldstein Schechter Koch
Firm/Company

2121 Ponce De Leon Blud, #1100

Coral Gables, FL 33134

Carmita. nasona askcpas. Com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vincent Carrodeguas at (305) 442-2200

Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR 14 2: 33 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:Cod	ablue TL, LIC
2. (a) Principal office address of limited liability company	y: 0/0 Vincent Carrologues
(Note: MUST BE STREET ADDRESS)	2121 Ponce DeLeon Blvd, #1100 Coral Gables, FL 33134
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	(same as Annipal Address)
8/17/07	L070000 84630
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Corporate Maintenance Service Lu
Registered Office Address:	1000 Brickell Aug. Suite215 Higni, FL 33131
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
<u>NEW</u> Registered Agent:	Vincent Carrodeguas
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Goldstein Schechter Koch 2121 Ponce De Leon Blud: #1100 Coral Gables FL 33134
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be identiability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company.	Florida street address of the registered office stical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote brwise provided in the articles of organization
Organius of a member or self-rescribing of a member	
Hector Gerzenstein Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my perchapter 608, F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability compar	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office ty has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00