

FROM : LAZARUS
DIVISION OF CORPORATIONS

FAX NO. : 3052201440

Sep. 14 2009 02:04PM P3
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848587

Florida Department of State
Division of Corporations
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Division of Corporations
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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 532-5973
Fax Number : (305) 220-1440

REGISTERED AGENT CHANGE

FIRST MORENA INVESTMENTS, INC.

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$35.00 |

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of OC in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: FIRST MORENA INVESTMENT, INC.
2. The principal office address: 100-1144 N UNIVERSITY DR.
PEMBROKE PINES FL 33024
3. The mailing address (if different): 8261 SW 124 ST
PINECREST FL 33156
4. Date of incorporation/qualification: Document number: 848587
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
JOSE, ACEVEDO A.
605 IVES DAIRY RD. G-203
MIAMI FL 33179

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

GABRIELA MANZANILLA.
8253 A SW 124 STREET
P.O. Box NOT acceptable
PINECREST FL 33156

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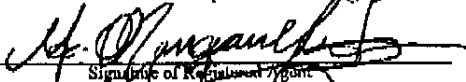
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Signature of an officer or director

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

9-14-09
Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CI128045 (8/05)

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