

A03000000250



ASTOR  
DEVELOPMENT GROUP

2701 SW Third Avenue  
Miami, Florida 33129

(City/State/Zip/Phone #)



PICK-UP



WAIT



MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

10/31

R/A change

A03-250

Office Use Only



700024152907

10/31/03--01045--009 \*\*35.00

MJM

FILED  
03 OCT 31 AM 11:26  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED  
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Larkins Investment Group, LLLP  
Name of the limited partnership

2. February 18, 2003 3. A03000000250  
Date of filing/registration in Florida Document number assigned

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

Francisco J. Ortega  
Name

5900 SW 73 Street #205  
Address

Miami, FL 33143  
City, State and Zip


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

Peter A. Torres C/O Astor Development Group,  
Name

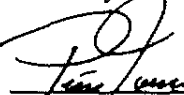
2701 SW Third Avenue  
Florida street address (P.O. Box not acceptable)

Miami FL 33129  
City, State and Zip

6. Such change(s) was/were authorized by the general partners.

  
Signature of General Partner

*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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.*

  
Signature of Registered Agent

**Make checks payable to Florida Department of State and mail to:  
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
Filing Fee: \$35.00**

**FILED**  
03 OCT 31 AM 11:26  
TALLAHASSEE FLORIDA  
SECRETARY OF STATE