DOCUMENT # A32995  1. Entity Name								FILED		
NORONHA ADVOGADOS, LTD.							02 APR 29 AM 8:57			
Principal Place of Business  1221 BRICKELL AVENUE, 9TH FLOOR MIAMI FL 33131				Mailing Address 1221 BRICKELL AVENUE. 9TH FLOOR MIAM! FL 33131				SECRETARY TALLAHASSE		<b>11</b> 1
Principal Place of Business     3. Mailing Address										
Suite, Apt. #, etc.				Suite, Apt. #, etc.		, <u>,,,,</u> ,,,,	DUE BY MAY 1, 2002			
City & State				City & State			4. FEI Number	65-0380821	Applied Fo	
Zip Country				lip	Coun	ntry	5. Certificate of Status Desired S8.75 Additional Fee Required			
	5Name a	nd Address of Current	Hegist	erea Agent		Name	7. Name and /	Address of New Registered	Agent	
CAMADO	O DOUNO					Name				
CAMARGO, BRUNO 1221 BRICKELL AVENUE, 9TH FLOOR MIAMI FL 33131					:	Street Address	s (P.O. Box Number is Not Acceptable)			
MIAWI FL	33131					City		· Fl	Zip Code	
8. The above	named entity s	submits this statement to	r the pu	urpose of changing its	registere	L ed office or regist	ered agent, or both	<u> </u>		
SIGNATURE _	Signature hyped or	printed name of egistered agent a	and title if	applicable.		<del></del>		DATE		
<ol><li>Capital Cor as Shown of</li></ol>	on record.					butions		11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION		
40	A GE NOTE: (	General Partners MA	Y NO	T be changed on the	ne form	IUST BE REGIS	STERED AND Action must be filed	CTIVE WITH THIS OFFICE I to change a general pa	rtner.	
12.	1/07000	GENERAL PARTNER	INFOR	RMATION	13.			ADDRESS CHANGES ON	LY	<b>-</b>  -
DOCUMENT # NAME STREET ADDRESS	V37622 NORONHA & ASSOC., P.A. 1221 BRICKELL AVE., 9TH FLOO MIAMI FL 33131				STRE	ET ADDRESS				ZE003 (9/01)
CITY-ST-ZIP DOCUMENT#					CITY-	- ST- ZIP	9000054819298 -05/07/0201081033 ****\$26.25 ****\$26.25			
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NAME STREET ADDRESS					1	-ST-ZIP	-	<del>.</del>	<del></del>	_
CITY-ST-ZIP DOCUMENT #	•				+	ET ADDRESS				
NAME : STREET ADORESS						-ST-2IP	T			$\dashv$
	ertify that the in	nformation supplied with strue and accurate and to	this filir	ng does not qualify for signature shall have t	the exen	mption stated in S	ection 119.07(3)(i), made under oath; t	Florida Statutes, I further cer hat I am a General Partner of	tify that the information the limited partnership	o or

SIGNATURE: DIGITALISM SIGNATURE AND TYPED OR PRIN

Anv 23, Lao 2 305 - 372 = 849

Date Daytime Phone \*