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R.A. Change

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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: International Alliance Associates, Ltd (Name of Corporation)				
(Manie of Corporation	")			
DOCUMENT NUMBER:				
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following	llowing:			
Susan Hagerty				
(Name of Contact Person)				
International Alliance Associates Ltd.				
(Firm/Company)				
405 East 56th Street Unit 9C (Address)				
(/144/035)				
New York, NY 10022				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Susan Hagerty at ( 2	12 \ 319-4389			
Susan Hagerty at (2° (Name of Contact Person) (An	rea Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

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

•	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Si ange is submitted for a corporation organized under the laws of the State of $\mathfrak l$	_
-	inge is submitted for a corporation organized under the taws of the State of <u>-</u> e or to change its registered office or registered agent, or both, in the State of Fl	
1 The name of th	the corporation: International Alliance Associates, Ltd. Corporation	\$50 M
	office address: 20764 West Dixie Highway	THE TO THE
	Florida 33180	75.72 2 C
3. The mailing ac	address (if different): 405 East 56th Street Unit 9C	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
New York, N	NY 10022	Carl Co
4. Date of incorp	poration/qualification: 9/18/2006 Document number: F0600	0006002
	d street address of the current registered agent and registered office on file with	n the
	Pablo Lancella	
	9130 So. Dadeland Blvd	(FORMER)
	Miami, FL 33156-7851	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	_
	Lester A. Gruda	(CUR REM
	20764 West Dixie Highway	
	(P.O. Box NOT acceptable)	
-	Aventura, Florida 33180	
The street address as changed will be	ess of its registered office and the street address of the business office of its be identical.	registered agent,
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an one board, or the corporation has been notified in writing of the change.	officer so
(S)gnatur	Susan Hagerty, Chairman  (Printed or typed name and tit	ie)
	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and comp d I am familiar with and accept the obligation of my position as registered ng filed merely to reflect a change in the registered office address. I hereby been notified in writing of this change.	•
Use!	h. 194 M/1/07	
/ (Sign	gnature of Registered Agent) (Date)	
If signing on beh	half of an entity:	
(Ту	yped 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
CR2E045 (8/05)