## F07000000280

| (Re                     | equestor's Name)   |              |
|-------------------------|--------------------|--------------|
|                         |                    |              |
| (Ad                     | dress)             |              |
|                         |                    |              |
| (Ad                     | dress)             |              |
|                         |                    |              |
|                         | y/State/Zip/Phone  |              |
| (Cit                    | y/State/Zip/Pilone | : # <i>)</i> |
| PICK-UP                 | WAIT               | MAIL         |
|                         |                    |              |
| (Bu                     | siness Entity Nan  | ne)          |
| (==                     | emoco miny main    | ,            |
|                         |                    |              |
| (Do                     | cument Number)     |              |
|                         |                    |              |
| Certified Copies        | _ Certificates     | of Status    |
|                         |                    |              |
| Special Instructions to | Elling Officer     |              |
| Special instructions to | Filing Officer.    |              |
|                         |                    | :            |
|                         |                    | ļ            |
|                         |                    | İ            |
|                         |                    |              |
|                         |                    |              |
|                         |                    |              |
|                         |                    |              |

Office Use Only

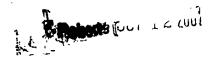


700110338867

10/08/07--01028--001 \*\*35.00

for the chy

FORETARY OF STATE



## **COVER LETTER**

| TO:     | Amendment Section Division of Corporations  |  |
|---------|---|--|
| SUBJI   | ECT: Expresso Management Inc.   | orporation)  |
| DOCU    | MENT NUMBER: F0700000280  |  |
| The en  | closed Statement of Change of Registered Office   | e/Agent and fee are submitted for filing.  |
| Please  | return all correspondence concerning this matter  | to the following:  |
|         | Jean-Charles Dibbs, Esq.<br>(Name of Co   | ntact Person)  |
|         | Shutts & Bowen LLP (Firm/Co   | ompany)  |
|         | 201 S. Biscayne Blvd., Suite<br>(Add  | e 1500 (JCD)<br>ress)  |
|         | Miami, FL 33131   |  |
|         | (City/State an  | d Zip Code)  |
| For fur | ther information concerning this matter, please of  | all:   |
| Jean-   | Charles Dibbs   | at (305) 379-9192<br>(Area Code & Daytime Telephone Number)  |
|         | (Name of Contact Person)  | (Area Code & Daytime Telephone Number)   |
| Enclose | ed is a \$35.00 check made payable to the Depart  | ment 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

| statement of ch  | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Delaware er to change its registered office or registered agent, or both, in the State of Florida.  |  |  |  |
|--|---|--|--|--|
| 1. The name of   | the corporation: Expresso Management Inc.   |  |  |  |
| -  | office address: c/o Jean-Charles Dibbs, Esq., Shutts & Bowen LLP iscayne Blvd., Suite 1500, Miami, FL 33131   |  |  |  |
| 3. The mailing   | address (if different): P.O. Box 145390, Coral Gables, FL 33134   |  |  |  |
| 4. Date of incor   | poration/qualification: 01/05/2007 Document number: F07000000280  |  |  |  |
|  | d street address of the current registered agent and registered office on file with the rtment of State:  |  |  |  |
|  | Alhambra Registered Agents, Inc.  |  |  |  |
|  | 2 Alhambra Plaza, Suite 1202  |  |  |  |
|  | Coral Gables, FL 33114  |  |  |  |
| 6. The name and (if changed):  | Coral Gables, FL 33114  d street address of the new registered agent (if changed) and /or registered office  Corporation Company of Miami  201 S. Biscayne Blvd, Suite 1500 (JCD)   |  |  |  |
|  | Corporation Company of Miami  |  |  |  |
|  | 201 S. Biscayne Blvd, Suite 1500 (JCD)  (P.O. Box NOT acceptable)   |  |  |  |
|  | Miami, FL 33131   |  |  |  |
| The street address changed will  | ess of its registered office and the street address of the business office of its registered agent, be identical.   |  |  |  |
| Such change wa   | as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.   |  |  |  |
| M Pan  | Matias Garfunkel, President (Printed or typed name and title)   |  |  |  |
| I hereby accept<br>I further agree<br>of my duties, an<br>document is bei<br>corporation has | the appointment as registered agent and agree to act in this capacity.<br>To comply with the provisions of all statutes relative to the proper and complete performance<br>and I am familiar with and accept the obligation of my position as registered agent. Or, if this<br>ing filed merely to reflect a change in the registered office address, I hereby confirm that the<br>s been notified in writing of this change. |  |  |  |
|  | with / soctor   |  |  |  |
|  | gnature of Registered Agent) (Date)   |  |  |  |
| • •  | thalf of an entity:   |  |  |  |
|  | Typed or Printed Name)  |  |  |  |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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