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SECRETARY FERONDO

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: 910 Limited, LLC				
(Name of corporation)				
DOCUMENT NUMBER: L00000001081				
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:				
Mitch Monroe				
(Name of person)				
Murray, Simmons & Ziegler, LLP				
(Name of firm/company)				
1401 E. Broward Blvd. #200				
(Address)				
Ft. Lauderdale, FL 33301				
(City/state and zip code)				
For further information concerning this matter, please call:				
Mitch Monroe af (954) 467-2000				
Mitch Monroe at (954) 467-2000 (Area code & daytime telephone number)				
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399				



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 16, 2003

MITCH MONROE MURRAY, SIMMONS & ZIEGLER, LLP 1401 E. BROWARD BLVD., #200 FT. LAUDERDALE, FL 33301

SUBJECT: 910 LIMITED, L.L.C. Ref. Number: L00000001081

We have received your document for 910 LIMITED, L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached form to change the Registered Agent for this Limited Liability Company, the form submitted is for a Corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 803A00022791

Michelle Hodges Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limit	ed liability company is:	910 Limited	, LLC	
2. The mailing address o	f the limited liability co	ompany is: P.O.	Box 30268, Ft	. Lauderdale
Florida 33303				
1-31-00		L00	000001081	
3. Date of filing/registrat	te of filing/registration in Florida 4. Document nun		cument number	
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Murray, David G. Esq.				
	321 SE 15th Ave.	Name		
Address				
Ft. Lauderdale, FL 33301				03 TAL
City, State and Zip				
City, State and Zip 6. The name and address of the new registered agent and/or office:				
Murray, David G. Esq.			SEE IN THE	
Name 1401 E. Broward Blvd. #200 Florida street address (R.O. Roy NOT acceptable)				
	Florida street address	s (P.O. Box NOT a	cceptable)	OI RIDA RIDA
	Ft. Lauderdale	FL 33301	<u> </u>	
City, State and Zip				

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Significate of a member or authorized representative of a member)

Leslie Turchin President of General Partner of Managing Member (Printed or typed name of signee)

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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00