2001 UN	LOUM DOSI	NESS NEP	URI	(UDN)					8
DOCUMENT	# L0000	0005953							<u>=</u>
1. Entity Name R.J.Z.G. INVESTMENTS, L.L.C.					FILE	D			4
					2001 MAY -2		in		
Principal Place of Busine 2875 NE 191 STREET	SS	Mailing Address 2875 NE 191 STREET					10		
PH 3A		PH 3A			DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA				
AVENTURA FL 33180		AVENTURA FL 33180							
2. Principal Place of Bus 3440 HOLLYWOO	3. Mailing Address 3440 HOLLYW OOD BLVD			.		41188 1611 1 48 1			
Suite, Apt. #, etc.		Suite, Apt. #, etc. 360			DO NOT W	DO NOT WRITE IN THIS SPACE			
City & State		City & State			4. FEI Number	1	<u> </u>	plied For]
HOLLYWOOD, FL 3∄921	Country USA	HOLLYWOOD, Zip 33021	F □ Coun	try USA	5. Certificate of Status Desired	<u> </u>	00 Add	t Applicable litional	-
	e and Address of Current R	,			7. Name and Address of New	F(ee Required	d	-
		ogistores agent		Name	MARK E. ROUSSO,	1			1
ROUSSO, MARK E ESQ 2875 NE 191 STREET				Street Addre	ss (P.O. Box Number is Not Acceptat				1
PH 3A					3440 HOLLYWOOD B	LVD, STE	360		1
AVENTURA FL 3318	30			City	HOLLYWOOD	FL	Zip Code	33021	1
8. The above named enti	ity submits this statement for	the purpose of changing	its registere	ed office or regi	stered agent, or both, in the State of I	Florida.			1
SIGNATURE	$A \nearrow$					4/26/	01		
Signature, type	d or printed name of registered agent an	id title if applicable. (f	NOT Registered	Agent signature req	uired when reinstating)	DATE			
		FILE Make Check	1 1 13	FEE (\$ \$50.0 o Departmen					
9.	MANAGING MEMBE	RS/MEMBERS	10.		ADDITION	S/CHANGES			
TITLE MGRM	JACINTO	☐ Delete	TITLE	1		· [Change	☐ Addition	11/00
STREET ADDRESS 111 NE	1ST STREET 2ND FL		STRE	ET ADDRESS					E083 (11/00)
CITY-ST-ZIP MIAMI F		☐ Delete	CITY-	-ST-ZIP		· ·	Change	Addition	CR2E
NAME ROUSSO), mark e 191 street PH 3A	Delete	NAM		440 HOLLYWOOD BLVD,				0
	RA FL 33180				OLLYWOOD, FL 33021	· <u></u>			
TITLE NAME		☐ Delete	, TITLE		,	[Change	Addition	
STREET ADDRESS			STRE	ET ADDRESS					
CITY-ST-ZIP		☐ Delete	TITLE	-ST-ZIP		[Change	Addition	}
NAME			NAM(ET ADDRESS					
STREET ADDRESS CITY-ST-ZIP				-ST-ZIP	100004	13358	331-	5	
TITLE NAME		☐ Delete	TITLE NAMI			170101(*50.88	******5		
STREET ADDRESS				ET ADDRESS -ST-ZIP					
CITY-ST-230		☐ Delete	TITLE		1.		Change	Addition	
NAME & STREET ADDRESS			NAMI STRE	ET ADDRESS	۶۰	/			
CITY-ST-ZIP		/_	CITY	-ST-ZIP		15		dormantia -	}
indicated on this repo	ne information supplied with to ort is true and accurate and to any or the receiver or trustee	hat my signature shall ha	ave the same	e legal effect as	Section 119.07(3)(i), Florida Statute if made under oath; that I am a mar apter 608, Florida Statutes.	s. I further certify aging member	y that the in or manage	r of the	}

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MAI/AGER, OR AUTHORIZED REPRESENTATIVE

4/26/01

954 322-4280

Daytime Phone #