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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.

ugeni, or boin, in the bi	are of I torma.	
1. The name of the lim	ited liability company is: MQUISITION Group	· CCC
2. The mailing address	of the limited liability company is: 405 NE 2"	& AVE
Itall	andule EL 33009	
-	106 4000000	075788
3. Date of filing/registr		
Florida Department o	Stered agent and the registered office address as shown on the of State: Capital Group CCC Name 400 S- Dixic Hap Sunt #6 Address Hallandale FC 33005 City, State and Zip So of the new registered agent and/or office: Mageirs Vahnish Name 405 NE 2nd nue Florida street address (P.O. Box NOT acceptable) Hallandale FL 33005 City, State and Zip	FILEC 03 MAR -6 AM 8: 36 SECRETARY OF STATE FAUL AHASSEE, FLORIDA
confirmed that after the and the business office liability company, it is the members of the lim the operating agreement (Signature of a member or aut	ompany is not organized under the laws of the State of Florida change or changes are made, the Florida street address of the of the registered agent will be identical. Or, in the case of a Florida company company or as otherwise provided in the articles of the limited liability company. In the property of a member of a member of all statutes relative to the proper and complete perform and accept the obligations of my position as registered agent and the imited liability company has been notified in writing the statutes of a member of this document is being filed to merely reflect a change in the rem that the limited liability company has been notified in writing the statutes of the proper and complete perform and accept the obligations of my position as registered agent and the limited liability company has been notified in writing the statutes.	registered office lorida limited n affirmative vote of of organization or

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

FILING FEE: \$25.00

(Signature of Registered Agent)