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#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

FILED

2005 MAY 23 P 12: 57

SECRETARY OF STATE
TALLAHASSEE. FLORIDA

May 11, 2005

ALLISON R. DAY, ESQ. 100 SOUTHEAST SECOND STREET 36TH FLOOR MIAMI, FL 33131

SUBJECT: VENTURES SOUTH CAROLINA, L.L.C.

Ref. Number: L00000010711

We have received your document for VENTURES SOUTH CAROLINA, L.L.C.. However, the document has not been filed and is being returned for the following:

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 105A00033780

#### **COVER LETTER**

### FILED

TO: Amendment Section Division of Corporations 2005 MAY 23 P 12: 57 SECRETARY OF STATE TALLAHASSEE. FLORIDA SUBJECT: Ventures South Carolina, L. L. C. (Name of corporation) DOCUMENT NUMBER: L00000010711 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: Allison R. Day, Esq. (Name of contact person) Genovese Joblove & Battista, P. A. (Firm/Company) 100 Southeast Second Street, 36th Floor (Address) Miami, Florida 33131 (City/state and zip code) For further information concerning this matter, please call: Allison R. Day, Esq. 349-2300 (Area code & daytime telephone number) (Name of contact person)

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

<u>Street Address:</u>
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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

liability company submit	s the following stateme te of Florida	6 or 608.508, Florida Statutes nt in order to change its regi	stered office ör registered		
1. The name of the limite	ed liability company is:	Ventures South Carolina,	L.L.C. MAY 23 P 12: 57		
2. The mailing address o	f the limited liability co	mpany is : 647 East Dania I	SECRETARY OF STATE Beach Boulevery OF STATE		
Dania, FL 33304		·			
September 6, 2000		L00000010711			
3. Date of filing/registrat	ion in Florida	4. Document nun	nber		
5. The name of the registe Florida Department of		tered office address as shown o	on the records of the		
	Name 100 Southeast Second Street, 36th Floor				
	Address Miami, Florida 33131 City, State and Zip				
6. The name and address	of the new registered ag	gent and/or office:			
	Allison R. Day, Esq				
	Name 100 Southeast Second Street, 36th Floor				
	Florida street address	(P.O. Box NOT acceptable)			
	Miami	FL 33131			
	City, S	tate and Zip			
confirmed that after the cl and the business office of liability company, it is her	nange or changes are marked the registered agent with the confirmed that the diability company or a	under the laws of the State of F ade, the Florida street address of Il be identical. Or, in the case of change(s) was/were authorized as otherwise provided in the art ompany.	of the registered office of a Florida limited I by an affirmative vote of		
(Signature of a member or authori	zed representative of a membe	r)			
(Printed or typed name of signee)					
I nereby accept the appoing the comply with the provision and I am familiar with in the Chapter 608, F.S. Or, if the confirm address, I hereby confirm	ntment as registered ag s of all statutes relative d accept the obligations his document is being f that the limited liabilit	gent and agree to act in this cap to the proper and complete pe s of my position as registered a lied to merely reflect a change y company has been notified in	pacity. I further agree to erformance of my duties, igent as provided for in in the registered office writing of this change.		
(Signature of Registered Agent)		<del></del>			

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

INHS18(10/99)

**FILING FEE: \$25.00**