L00000013563

ALAIN LECUSAY, ESQ. ALAIN LECUSAY, P.A. 2356 SW 12 ST MIAMI, FL 33135				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
1-13563				
L-13563 RA change Office Use Only				



900048409079

03/24/05--01024--016 **25.00



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.

The name of the limited liability company is:Casa Bella International Studio, LLC				
		ompany is : 1900 SW 3 AV,		
11/06/2000	·	L0000001356	63	
3. Date of filing/registration in Florida		4. Document number		
	ered agent and the regis	stered office address as shown		
	1900 SW 3 AV	Name	_	
	Miami, FL 33129 City,	Address State and Zip	- - :	
6. The name and address	of the new registered a	gent and/or office:		
	Alain Lecusay, P.A	ı .		
	2356 SW 12 ST	Name		
	Florida street addres	s (P.O. Box NOT acceptable)	िंशीन	
	Miami	_{FL} 33135	OS MJ SECR ALLA	
	City, S	State and Zip	# # N	
confirmed that after the cl	nange or changes are methor registered agent we reby confirmed that the diability company or the limited liability company or the liability company or		s of the registered office	
	rea representative of a memo-			
Carlos Forato (Printed or typed name of signee)			-	
`		gent and agree to act in this c e to the proper and complete is of my position as registered filed to merely reflect a chang ty company has been notified	apacity. I further agree to performance of my duties, I agent as provided for in the registered office in writing of this change.	

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

INHS18(10/99)

FILING FEE: \$25.00