PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1. DOCUMENT # L01000005355

Name and Mailing Address

2. New Mailing Address

FILED

02 NOV 22 AN 11: 29

SECRETARY OF STATE TALLAHASSEE, FLORIDA

4. State/Country of Formation

0001083 01 FP 0.352 **PRSRT T4 0 0615 33015-363721 17851 NW 78TH AVENUE, L.L.C. 8021 NW 175 STREET HIALEAH FL 33015-3637



170	ng Address 40 SW 48 st	/-			4. State/Coun	,		
DAVIL	=,FL 3333				5. Date Organ	ized or Qualified- ness in Florida		04/06/2001
rincipal Place of Business 8021 NW 175 STREET HIALEAH FL 33015		3. New Principal Place of Business Address / 7040 Sue 4817 City, State, Zip Dauge, FL 3333/			6. FEI Number Applied For Not Applicabl 7. CERTIFICATE OF STATUS DESIRED \$5.00 Additional Fee requir for a Certificate of Status			
	8. Name and Address of Current F				9. Name and A	Address of New I	Registered A	ent
PEREZ, FERNANDO A 8021 NW 175 STREET HIALEAH FL 33015				9. Name and Address of New Registered Agent Name FERNAND (4152 Street Address (P.O. Box Number is Not Acceptable) 5015 Sw 195 TERRACE				
				CityDAULE		701(1)	FL.	Zin C3d3332
ignature of	Laure Son	4	٠	•		1	1-11-0	7
egistered Age	ON Street Addresses of Each Managing Name of Managing	STERED AGENT MUST		et Address of Ea	ch	Date//		
egistered Age 1. Names ar Title(s)	Street Addresses of Each Managing	Member/Manager	Stre	ing Member/Man			City / State	
egistered Age 1. Names ar Title(s) MGRM	Name of Managing Members/Managers	Member/Manager 8021	Stre- Manag	ing Member/Man			City / State	

as if made under oath.

Managing Member/Manager

Signature of