
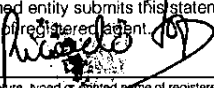
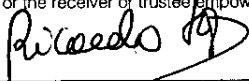


**FILED**  
**Apr 12, 2004 8:00 am**  
**Secretary of State**

24039950

<b>DOCUMENT # L01000009026</b>				04-12-2004 90029 001 ****50.00	
1. <b>3 B'S CASH AND CARRY STORE, LLC</b>					
548 W 18TH ST HIALEAH, FL 33010		201 S BISCAYNE BLVD 28TH FLR MIAMI, FL 33131		24039950	
2. Principal Place of Business		3. Mailing Address		4012004 Chg-LLC CR2E083 (10/03)	
Suite, Apt. #, etc.		548 W 18th St		4. FEI Number 65-1115750	
City & State		HIALEAH FL 33010		Applied For Not Applicable	
Zip Country		Zip Country		5. Certificate of Status Desired \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent			
REYGADAS, JOSE A 201 S BISCAYNE BLVD 28TH FLR MIAMI, FL 33131		IOJES, RICARDO 548 W 18th Street HIALEAH FL 33010			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  DATE					
Filing Fee is \$50.00 Due by May 5, 2004		Make check payable to Florida Department of State			
9. MGRM IOJES, RICARDO		10. 548 W 18th Street Hialeah FL 33010			
MGRM IOJES, CARLOS		548 W 18th Street Hialeah FL 33010			
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE:  Date Daytime Phone #					