

LO1000013708

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: INVERSIONES GENOVES, LLC
(Name of corporation)

DOCUMENT NUMBER: FEI # 52 - 2337195

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:

GRISELDA URATEGUI
(Name of person)

INVERSIONES GENOVES, LLC
(Name of firm/company)

3439 LAUREL OAKS LANE
(Address)

Hollywood, FL 33021
(City/state and zip code)

300007057999--1
-08/12/02--01074--011
*****35.00 *****35.00

For further information concerning this matter, please call:

GRISELDA URATEGUI at (305) 7661223
(Name of person) (Area code & daytime telephone number)
(954) 9076256

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section	
Name	Division of Corporations
Available	Box 6327
Tallahassee, FL 32314	
Document Examiner	DCC
Updater	DCC
Verifier	DCC
Adjudgement	DCC
CR2E045(07/02)	
Verify	DCC

Street Address:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

FILED
02 AUG 12 AM 10:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LO1000013708

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS LLC**

Pursuant to the provisions of sections ~~607.0502, 617.0502, 607.1508, or 617.1508~~ ^{608.416 or 608.508} Florida Statutes,
this statement of change is submitted for a ~~corporation~~ ^{LLC} organized under the laws of the State of
FLORIDA in order to change its registered office or registered agent, or both, in the State
of Florida.

1. The name of the ~~corporation~~ ^{LLC}: INVERSIONES GEMOVES, LLC
2. The principal office address: 19701 E. COUNTRY CLUB DR. UNIT 101.
AVENTURA, FL 33180
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 8/16/01 ^{organization} Document number: LC1000013708

5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

GRISelda URcATEGUI
19701 E. COUNTRY CLUB DRIVE
AVENTURA, FL 33180

6. The name and street address of the new registered agent (if changed) and /or registered office (if
changed):

GRISelda URcATEGUI
3439 LAUREL OAKS LANE
HOLLYWOOD, FL 33021

(P.O. Box or personal mailbox NOT acceptable)

The street address of its registered office and the street address of the business office of its registered
agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so
authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
(Signature of an officer, chairman or vice chairman of the board)

GRISelda URcATEGUI
(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity.
I further agree to comply with the provisions of all statutes relative to the proper and complete
performance of my duties, and I am familiar with and accept the obligation of my position as
registered agent. Or, if this document is being filed merely to reflect a change in the registered
office address, I hereby confirm that the corporation has been notified in writing of this change.*

[Signature]
(Signature of Registered Agent)

08/06/02
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

*** * * FILING FEE: \$35.00 * * ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA