L01000018521

	}
(Requestor's Name)	
(Address)	
	}
(Address)	
(City/State/Zip/Phone #)	1
FI DIOKUD : FI WAT FI MAN	
PICK-UP WAIT MAIL	
	1
(Business Entity Name)	
(Document Number)	
•	-
Certified Copies Certificates of Status	1
Special Instructions to Filing Officer:	
[0] 15h_	\downarrow
	ł
Mar XI	



200055574322

SECREDIAY OF STATE

06/08/05--01052--011 **400.00

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.

1. The name of the limite	ed liability company is:	Market (Garage, LLC		·	
			c/o A.I. Boymelgreen, 70	00 Pacific		
Street, Brooklyn, NY 1		1 3				
10/25/2001	3	 	L01000018521		·	
3. Date of filing/registration in Florida		•	4. Document number			
5. The name of the register Florida Department of	State:		address as shown on the re	cords of the		
	Registered Agents		LLC			
	Name 100 Southeast Second Street, Suite 2900					
	Miami, Florida 3313	Address		ATTVEASE		
	City, State and Zip					
6. The name and address	of the new registered as	gent and/or	office:	CHETATY OF STAT	PM	
	Andrew B. Hellinge	r, Esq.		STA ALCS ALCS	=	
	Name 200 So. Biscayne Blvd., Suite 3000					
	Florida street address	s (P.O. Box	NOT acceptable)			
	Mìami	FL	33131			
	City, S	tate and Zi	p			
confirmed that after the cland the business office of liability company, it is he the members of the limite the operating agreement of	hange or changes are maked the registered agent with reby confirmed that the datability company or a fifth limited liability confirmed the limited liability confirmed the limited liability confirmed liability liability confirmed liability liability liability confirmed liability liabili	ade, the Flo II be identichentichenge(s) as otherwiscompany.	tws of the State of Florida, in orida street address of the recal. Or, in the case of a Floriwas/were authorized by an active provided in the articles of	gistered official		
(Signature of a member of author	ized representative of a membe	er)	•			
Andrew B. Hellinger, A			· en en			
` ,,		gent and age to the pro to the pro s of my pos filed to mer y company	ree to act in this capacity. per and complete performar ition as registered agent as ely reflect a change in the r has been notified in writing	I further agre ice of my du pe of my du pe of this chan of this chan	ee to ties, in ice ge.	
Divisio	on of Cornorations P	O Boy 632	7 Tallahassee El. 32314			

FILING FEE: \$25.00

INHS18(10/99)