## T02000008820

(Requestor's Name)				
Novus Ocea 9785 SW 99 Avend	an In ue, Mia	Vestm mi, Florid	ents, a 33176	Posta 3835 KENE
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TALLAHASSEE TO 12: 11

## 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 limited liability company is: Novus Ocean Investments, LLC		
2. The mailing address of the limited liable 9785 SW 99 Avenue, N		
April 12, 2002	L02000008820	
3. Date of filing/registration in Florida	4. Document number	
5. The name of the registered agent and the Florida Department of State:  Jose Lopez	e registered office address as shown on the records of the	
OZOF CW O	Name	
9785 SW 9	Address	
Miami, FL :		
	City, State and Zip	
6. The name and address of the new regist	ered agent and/or office:	
Teresa Lop	pez Francisco de la companya de la c	
9785 SW 9 Florida street a	address (P.O. Box NOT acceptable)	
Miami, FL	33176 EL ES T	
	City, State and Zip	
and the business of the change or changes and the business of the of the registered ag liability company, this hereby confirmed the members of the limited liability compathe operating agreement of the limited liab		
(Signature of a member of authorized representative of	a member)	
Jose Lopez		
(Printed or typed name of signee)	,	
I hereby accept the appointment as registe comply with the provisions of all statutes if and I am familiar with and accept the oblic Chapter 608, F.S. Or, if this document is address, I hereby confirm that the limited (Signature of Registered Agent)	ered agent and agree to act in this capacity. I further agree to relative to the proper and complete performance of my duties, igations of my position as registered agent as provided for in being filed to merely reflect a change in the registered office liability company has been notified in writing of this change.	

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

INHS18(10/99)

**FILING FEE: \$25.00**