## L02000013730

LAW OFFICES

## VINCENT J. ALTINO, P.A.

SUITE 4100 2101 WEST COMMERCIAL BOULEVARD FORT LAUDERDALE, FLORIDA 33309

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> > 500007570915

\*\*\*\*\*25.00 \*\*\*\*\*25.00

October 3, 2000

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

Re: Nurmi/Benchmark II, LLC

Dear Sir or Madam:

I would appreciate your filing the enclosed Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company in connection with the entity. My trust account check in the amount of \$25.00 is also enclosed to cover the cost of filing same.

Please do not hesitate to contact me if you have any questions or need additional information.

Very truly yours,

VINCENT J. ALTINO, P.A.

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## 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	d liability company is: _	NURI	MI/BENCHM	IARK, LLC			
2. The mailing address of	f the limited liability com		1010 Sem		z <b>e,</b> #150 ?L 33304	)1	
6/5/02			L020000	13730	<del></del>	•	<del></del>
3. Date of filing/registration in Florida				ent number			
5. The name of the registe Florida Department of S	red agent and the register State: Vincent J. Alti			hown on the	records o	of the	
	N	Vame	· · · · · · · · · · · · · · · · · · ·	<u> </u>		, .	HaMeda, a Jack and a de la .
	2101 West Comme		ulevard,	#4100			
	Ad Fort Lauderdale	ddress FL 333	109	·	•	-	-
	City, St	ate and Zip	5	· ·			-
6. The name and address of	of the new registered ager	nt and/or of	ffice:				
	Alex Locay		•		<del></del>		
	Na 1010 Seminole D		501, For	t Lauderda	ALC 1e, AE	<b>2</b> 3 <b>33</b> 04	4
	Florida street address (F				HAS	-	71
	F	FL			EC C	<u>o</u>	_
	City, Stat	e and Zip		<del></del>		Ī	Ö
If the limited liability com confirmed that after the chand the business office of liability company, it is her the members of the limited the operating agreement of	tange or changes are made the registered agent will be eby confirmed that the ch I liability company or as o	e, the Flori be identical lange(s) wa otherwise i	da street ad l. Or, in th	dress of the case of a Fi	registere lorida lim	d Offic nited	
	i				-		
(Signature of a member or authori Alex Locay	zed representative of a member)						
(Printed or typed name of signee)	<u> </u>	·			-·		
I hereby accept the appoil comply with the provision and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm	ntment as registered agen s of all statutes relative to l accept the obligations o his document is being file that the limited liability c	nt and agre the prope of my positi d to merely company ho	te to act in r and comp on as regis y reflect a c as been not	this capacity plete perform tered agent of change in the ified in writi	. I furthe lance of n as provide registere ng of this	r agre ny dui ed for ed offi chan	ee to ties, in ice ge.
(Signature of Registered Agent)	<u>ii ·</u>	<del>-</del>		- = -	-		
Alex Locay Division	n of Corporations, P.O.	Box 6327,	Tallahass	ee, FL 3231	.4		

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FILING FEE: \$25.00