## 102-00014448

(R	equestor's Name)	
(A)	ddress)	
(A	ddress)	· · · · · · · · · · · · · · · · · · ·
(C	ity/State/Zip/Phone#	)
PICK-UP	WAIT	MAIL
(Bi	usiness Entity Name)	
(De	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
189,707, 6	71	21,7
	Office Use Only	U



400024747614

11/20/03 -01066 --015 \*\*35.00

O4 BAB-6 AM 8: 47



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 24, 2003

SCHREIBER RODON-ALVAREZ, P.A. ATTN: MARY LOU RODON-ALVAREZ 2222 PONCE DE LEON BLVD PENTHOUSE SUITE CORAL GABLES, FL 33134-5039

SUBJECT: ENERLAT, LLC Ref. Number: L02000014448 O4 TASSEE FLORID

We have received your document for ENERLAT, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Letter Number: 703A00063630

Marsha Thomas Document Specialist

Virginian of Corporations D.O. BOY 6227 Tallahaggas Florida 32314

## 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:Enerlat, LLC
2. The mailing address of the limited liability company is: 1851 N.W. 125th Ave., Suite 329
Pembroke Pines, FL 33328
6-10-02 L02000014448
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:  Dade Corporate Services, Inc.
Name  2300 Coral Way, Suite 103, Miami, Florida 33 As  Address  Miami, Florida 33145  City, State and Zip
6. The name and address of the new registered agent and/or office:
Mary Lou Rodon Alvarez
Name 2222 Ponce de Leon Blvd. Penthouse Florida street address (P.O. Box NOT acceptable)
Coral Cables
City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.  (Signature of a member of authorized representative of a member)
Julio E. Pabon, Director
(Printed or typed name of signee)
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 obligations of my position as registered agent as provided for in Chapter 608, 5.5. Or, if this document is being filed to merely reflect a change in the registered office address, thereby confirm that the limited liability company has been notified in writing of this change.  (Signature of Registered Agent)
(Signature of Registered Agent)  Mary Lou Rodon Alvarez
Mary Lou Rodon Alvarez Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

NHS18(10/99) FILING FEE: \$25.00