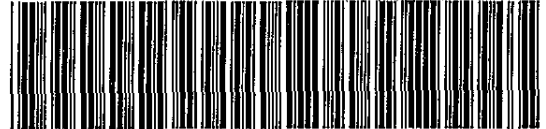


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03 MAY 19 AM 9:25

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA



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05/19/03--01030--004 **50.00

(Requestor's Name)

(Address)

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A Full Service Law Office

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 13, 2003

State of Florida
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

Re: ATMA, LLC
Document No.: L02000016224

Dear Division of Corporations:

Attached to this correspondence is an Amendment to Articles of Organization and a Change of Registered Agent form, along with a check in the amount of \$50.00 for filing fees.

Please process these documents as soon as possible and contact my office if you have any questions or if there are any problems.

Thank you in advance for your assistance with this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Larry A. Harshman".

Larry A. Harshman, Esq.

Enc: Statement of Change of Registered Agent
Articles of Amendment to Articles of Organization

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR LIMITED LIABILITY COMPANY**

FILED
03 MAY 19 AM 9:25
STATE
TALLAHASSEE, FLORIDA

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: ATMA, LLC
2. The mailing address of the limited liability company is : _____
9064 SW 113 AVENUE, MIAMI, FLORIDA 33176-1181

3. Date of filing/registration in Florida JUNE 27, 2002
4. Document number L02000016224


5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

CLARA HERNANDEZ
Name
3785 NW 82 AVENUE
Address
MIAMI, FLORIDA 33166
City, State and Zip

6. The name and address of the new registered agent and/or office:

ATTILIO FORESTI
Name
9064 SW 113 AVENUE
Florida street address (P.O. Box NOT acceptable)
MIAMI FL 33176
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 or authorized representative of a member)

ATTILIO FORESTI

(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, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

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