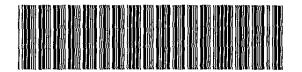
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SIMON, SIGALOS & SPYREDES

PROFESSIONAL ASSOCIATION
ATTORNEYS AT LAW
120 EAST PALMETTO PARK ROAD
SUITE 100
BOCA RATON, FLORIDA 33432

MICHAEL W. SIMON GEORGE L. SIGALOS ANASTASIOS TOM SPYREDES MICHELE R. BEERMANN TELEPHONE (561) 447-0017 FACSIMILE (561)447-0018

November 17, 2003

Florida Department of State Division of Corporations P.O. Box 632? Tallahassee, FL 32314

RE:

Megamar International, LLC 5701 Camino Del Sol #101 Boca Raton, Florida 33433

Statement of Change of Registered Agent

Dear Sir or Madam:

With reference to the above-captioned limited liability company, enclosed please find our check number 7114 in the sum of \$25.00 made payable to Florida Department of State representing filing fee.

Please process this application and return a stamped copy back to this office in the self-addressed stamped envelope provided. Thank you for you attention to this matter and request that you contact the undersigned should you have any questions.

Yours truly,

Anastasios Tom Spyredes

ATS:mm Encs.

cc: Clients

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	I liability company is:	Megamar	International, LLC			
2. The mailing address of				ol #101		,
Boca Raton, Florida 33		^ -				
August 28, 2002			L02000022314			
3. Date of filing/registration in Florida			4. Document number	r		
5. The name of the register Florida Department of S		tered office a	address as shown on th	he records	s of the	
•	1489 W. Palmetto F	Name Park Road ≉	" 425			•
,	Boca Raton, Florida	Address a 33486 State and Zi	p	TALLA	° 03	٠ ، و
6. The name and address of	of the new registered ag	gent and/or o	office:	美元	VON EQ	
	Simon, Sigalos & S	pyredes, P.	.A.	SSE SSE	2	- Carrier
120 East Palmetto Park Road, Suite 100						i M
ţ ·	Florida street address	s (P.O. Box l	NOT acceptable)	2	10:2	
	Boca Raton,	FL 3343	2	Bř	7	
	City, S	tate and Zip	, <u> </u>			
If the limited liability comconfirmed that after the chand the business office of liability company, it is her the members of the limited the operating agreement of the limited that the limited liability common support that the limited liability common support that the limited liability common support that the limited liability company is a support that the liability company is a support	tange or changes are method the registered agent with the confirmed that the disability company or a fethe limited liability confirmed the lia	ade, the Floi ill be identicated that the change (s) was otherwise ompany.	rida street address of t al. Or. in the case of a	the registe a Florida l	ered offi limited	
(Printed or typed name of signee)	eus Giravid	<u> </u>				
I hereby accept the appoing the comply with the provision and I am familiar with an Chapter 608, F.S. Or, if the address, I hereby confirm	intment as registered as s of all statutes relative d accept the obligation his document is being j that the limited liabilit	gent and agr e to the prop is of my posi filed to mere ty company i	ree to act in this capac per and complete perfo tion as registered age ly reflect a change in has been notified in w	city. I furn ormance of the regist riting of t	ther ago of my di vided fo tered of his cha	ree to ities, r in fice nge.
(Cignature of Pagistered Agent)	√ ₽		was reing			_

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

INHS18(10/99) FILING FEE: \$25.00