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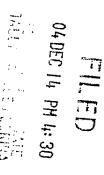
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MJH



## Law Offices LEVINSON & LICHTMAN, LLP

## A Partnership of Professional Associations

120 East Palmetto Park Road Suite 100 Boca Raton, Florida 33432

Telephone (561) 869-3600 Facsimile (561) 869-3601 Miami Office Courvoisier Centre 501 Brickell Key Drive Suite 300 Miami, Florida 33131

Telephone (305) 374-3471 Facsimile (305) 374-1001

December 10, 2004

Department of State Division of Corporations Corporate Filings Post Office Box 6327 Tallahassee, FL 32314

Member Florida and New York Bars

Jonathan J. Lichtman

RE: Global Securities Advisors, LLC

Global Securities Holdings, LLC Global Securities Management, LLC Intrepid Real Estate Holdings, LLC

Dear Sir/Madam:

Enclosed please find Statements of Change of Registered Office or Registered Agent for each of the above-referenced companies, along with a check in the amount of \$100.00 made payable to the Florida Department of State for filing fees. Please process these changes as soon as possible.

If you have any questions or need additional information, please do not hesitate to call. Thank you for your assistance in this regard.

Jonathan J. Lichtman

JJL/mcp Enc.

## 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 limit	ed liability company is: _	GLOBAL SECURITIES H	OLDINGS, LLC
2. The mailing address o	f the limited liability com	pany is: 701 Brickell Avenue	, Suite 2040
Miami, FL 33131			· · · · · · · · · · · · · · · · · · ·
10/24/02	>	L02000028341	
3. Date of filing/registration in Florida		4. Document number	
5. The name of the registration Florida Department of	ered agent and the register State:	red office address as shown on the	he records of the
	Allwyn Jourdan		* ,
		Name enue, Suite 2030	
	Ad Miami, FL 3313	ddress 1	
		ate and Zip	
6. The name and address	of the new registered ager	nt and/or office:	
	Jonathan J. Lichtman	, P.A.	PH U: 30
	120 E. Palmetto Park	me Road, Suite 100	30 30 S
	Florida street address (	P.O. Box NOT acceptable)	•
	Boca Raton	FL 33432	_
	City, Star	te and Zip	
		der the laws of the State of Florie, the Florida street address of the identical. Or, in the case of a nange(s) was/were authorized by otherwise provided in the article apany.	lda, it is hereby he registered office I Florida limited an affirmative vote of as of organization or
(Signature of a member or author	ized representative of a member)	<del>·                                      </del>	•
Justin DalMolin			
(Printed or typed name of signee)			•
I hereby accept the appo comply with the provision and I am familiar with an Chapter 608, E.S. Or, if address, I hereby confirm	intment as registered ager is of all statutes relative to a accept the obligations of this document is being file that the limited liability of	nt and agree to act in this capac o the proper and complete perfo of my position as registered ager ed to merely reflect a change in company has been notified in wr	ity. I further agree to rmance of my duties, it as provided for in the registered office riting of this change.
(Signature of Registered Agent)			
Divisio	on of Corporations, P.O.	Box 6327, Tallahassee, FL 32	2314

**FILING FEE: \$25.00** 

INHS18(10/99)