70	101 OCT 28 P 12: 23
(Requestor's Name)	STORETARY OF STATE
(Address)	70004178
(Address)	7000-176
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	10/28/0401/12
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
· <b>**</b>	
	(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:

Office Use Only

36807

7--005 \*\*35.NO

## 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.

agent, or both, in the Sic	*		
1. The name of the limit	ted liability company is:	801 Arthur Godfrey, LLC	<del></del>
2. The mailing address	of the limited liability co	ompany is: 801 Arthur Godf	rey Road, Suite 600
Miami Beach, FL 331		• •	
11/19/2002		L0200003097	n
3. Date of filing/registra	tion in Florida	4. Document nu	
3. Date of Hilligregistra	mon in riorida	4. Document nu	inoci
5. The name of the regis Florida Department of		stered office address as shown	on the records of the
	1200 Brickell Aven	Name nue, Ste. 1500	-
		Address	<u>.</u>
	Miami, FL 33131	<b></b>	三二二 三二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二
	City	, State and Zip	F. 8 =
6. The name and address	s of the new registered a	gent and/or office:	TILE BOL 28 STREET, SEE
	Pam Pearce		DOT 28 F
	801 Arthur Godfrey	Name y Road, Suite 600	P P: 23
	Florida street addres	ss (P.O. Box NOT acceptable)	23
	Miami Beach	FL 33140	<b>,</b>
	City, S	State and Zip	
confirmed that after the	change or changes are not the registered agent we ereby confirmed that the ed liability company or	under the laws of the State of made, the Florida street address will be identical. Or, in the case e change(s) was/were authorize as otherwise provided in the accompany.	of the registered office of a Florida limited
(Signature of a member or author	orized representative of a memb	per)	
Stephen H. Bittel	lavana		
(Printed or typed name of signe	torsooper_	<u>-</u>	
I hereby accept the appropriate comply with the provision and I am familiar with a Chapter 608, F.S. Or it address, I hereby confine	ointment as registered a ns of all statutes relativ nd accept the obligation this document is being n that the limited liabili	agent and agree to act in this co be to the proper and complete to ms of my position as registered filed to merely reflect a chang ty company has been notified i	apacity. I further agree to erformance of my duties, agent as provided for in e in the registered office in writing of this change.
(Signature of Registered Agent)		<del></del>	

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

FILING FEE: \$25.00

INHS18(10/99)