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## 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: AESUKF TECHNOLOGIES GROUP LL
2. The mailing address of the limited liability company is: 2598 5W 10th 5T.
- EDYNHAN BEACH 12 33426.
1804 02 (12/04/02) 10200051424
3. Date of filing/registration in Floritia 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:
Name (Repression VC.
2711 CONTERVILLE RD. Spe 40 1201 Hays 34.
Address 19808 TALLAGASSEE 3230
6. The name and address of the new registered agent and/or office:
Paul C. fabile JR.
2519 SW 10th Steper Fi &
Florida street address (P.O. Box NOT acceptable)
City, State and Zip
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)
(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 providing for in Chapter 60%, F.S. Ov., if this document is being filed to merely reflect a change in the registered office address, I herety confirm that the limited liability company has been notified in writing of this change.
(Signature of Regisfered/Agent)  Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00