## 63000000821

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SECRETARY OF STATE ALLAHASSEE, FLORID,

13-D)

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: GALERIC D'ART (Name of Limite	NADER LLC d Liability Company)	
Dear Sir or Madam:		
. The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
MYRIAM NADER (Name of Person)  9260 SW 59 S7 (Firm/Company)  (Address)  MIAM (Fx 33173) (City/State and Zip Code)	2007 JUN 13 AM 10: 07 SECRETARY OF STATE TALLAHASSEE, FLORID	
For further information concerning this matter, ple		
MYRIAM NADER at (Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR ROTH 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 State of Florida.
1. The name of the limited liability company is: GALERIE D'ART NADER, LL
2. The mailing address of the limited liability company is: 11491 NW 76 STREET
MIAMI, FL 33178
MAY 29 2007  3. Date of filing/registration in Florida  LO300000821  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:  MYRIAM NADER  Name  1911 PONCE DE LEON BLVD  Address City, State and Zip  33134
6. The name and address of the new registered agent and/or office:
TOUN NADER  11491 NW 76 STREET Florida street address (P.O. Box NOT acceptable)  MIAM   FL 33178  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)
(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.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

gnature of Registered Agent)