

L03000008484

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

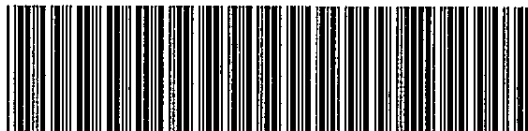
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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BRUCE LAMCHICK, P.A.
ATTORNEY AT LAW
TWO DATRAN CENTER, SUITE 1101
9130 SOUTH DADELAND BOULEVARD
MIAMI, FLORIDA 33156
—
TELEPHONE (305) 670-4455
FAX (305) 670-4422

BRUCE LAMCHICK
WARREN BILCHIK

July 25, 2003

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

Re: 1259, LLC

Dear Sir or Madam:

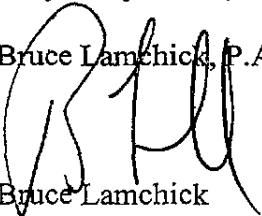
Enclosed please find the following documents relating to the above referenced corporation.

- 1) Transmittal Letter
- 2) Statement of Change of Registered Agent
- 3) Resignation of Registered Agent
- 4) Articles of Amendment

I have also enclosed a check in the amount of \$135.00 representing the filing fee for these documents. Please feel free to call me with any questions or concerns you may have.

Very Truly Yours,

Bruce Lamchick, P.A.



Bruce Lamchick

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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: 1259, LLC
2. The mailing address of the limited liability company is : 2165 SW 103 Place, Miami, Florida 33165

March 10, 2003
3. Date of filing/registration in Florida

L03000008484
4. Document number

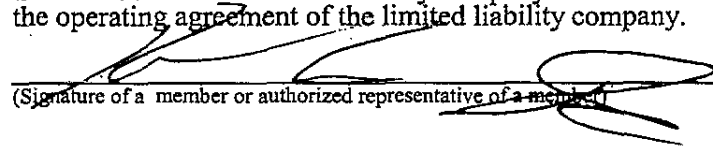
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Sophie Blanc
Name
2165 SW 103 Place
Address
Miami, Florida 33165
City, State and Zip

6. The name and address of the new registered agent and/or office:

Bruce Lamchick, Esq.
Name
9130 S. Dadeland Blvd., Suite 1101
Florida street address (P.O. Box NOT acceptable)
Miami FL 33156
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.


(Signature of Registered Agent)

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

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