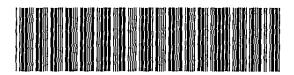
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STATEMENT OF CHANGE OF REGISTERED OF REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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: MIAMI CAPITAL GROUP, LLC	
2. The mailing address of the limited liability company is: 4651 Sheridan Street, Suite 20	00,
Hollywood, Florida, 33021	五章 201
4/2/03	h ' [→]
3. Date of filing/registration in Florida 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:	he
Theodore R. Stotzer, Esq.	
Name	
c/o Swerdlow Real Estate Group, LLC 5/co	සු <u> </u>
Address ≥⊆	SE .
Hollywood, Florida 33021	No ma
City, State and Zip	£ € €
6. The name and address of the new registered agent and/or office:	
Theodore R. Stotzer, Esq.	ra in in
c/o Swerdlow Boca Developers Group, LLC 321 East Hillsboro Blyd.	
Florida street address (P.O. Box NOT acceptable)	•
Trottad bases deatess (1.0. Don 110 1 deceptator)	
Deerfield Beach FL 33441	
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 of and the business office of the registered agent will be identical. Or, in the case of a Florida limite liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative the members of the limited liability company or as otherwise provided in the articles of organization operating agreement of the limited liability company.	ffice
(Signature of a member or authorized representative of a member)	·• ·
(0.5	
Theodore R. Stotzer, Authorized Representative	
(Printed or typed name of signee)	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further a comply with the provisions of all statutes relative to the proper and complete performance of my cand I am familiar with and accept the obligations of my position as registered agent as provided that I am familiar with and accept the obligations of my position as registered agent as provided to capacity reflect a change in the registered cadress, I hereby confirm that the limited liability company has been notified in writing of this ch	gree to luties, for in office ange.
	•
(Signature of Registered Agent) Theodore R. Stotzer, Registered Agent	

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

INHS18(10/99)

FILING FEE: \$25.00