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CHAISION OF CORPORATIONS

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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.

agona, or only are the order of	`	
1. The name of the limited liability company is: Homestlad Law C	for	cl.
2. The mailing address of the limited liability company is: 1474 N. Hamsha	d	Blig
Homested fr 33080		
5/21/03 1030000189	40	5
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 record Florida Department of State:		_
Law Offices y Carlos O. Gome	£,,	P.A.
102 Cast 49th Street		
Haliah 42 33013 City, State and Zip	r 40	DIVISION
6. The name and address of the new registered agent and/or office:	11 HVC	55 55 55 55 55 55 55 55 55 55 55 55 55
Nanette of Colow	∀	COR COR
1474 N. Homestead Blvd	AM IO:	PORA
Florida street address (P.O. Box NOT acceptable)	9	
Homustead & 33030		U ,
City, State and Zip		
If the limited liability company is not organized under the laws of the State of Florida, it is he confirmed that after the change or changes are made, the Florida street address of the register and the business office of the registered agent will be identical. Or, in the case of a Florida liability company, it is hereby confirmed that the change(s) was/were authorized by an affirm the members of the limited liability company or as otherwise provided in the articles of organ the operating agreement of the limited liability company. (Signature of a member of authorized representative of a member)	red o limite	iffice ed e vote of
(Printed or typed name of signee)		
I hereby accept the appointment as registered agent and agree to act in this capacity. I furn comply with the provisions of all statutes relative to the proper and complete performance of and I am familiar with and accept the obligations of my position as registered agent as providing the first document is being filed to merely reflect a change in the regist address I hereby confirm that the limited liability company has been notified in writing of the	ther a f my ided ered his ch	igree to duties, for in office iange.

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