103000023307

John Kim & Sonia Yoo 9445 SW 63rd Court Pinecrest, FL 33156
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200042992182

12/13/04--01013--012 **25.00

FILE U
2004 DEC 13 PM 2: 30
2004 DEC 13 PM 2: 30
2004 DEC 13 PM 2: 30

1. BRYAN DEC 2 0 2004

' 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.

agent, or both, in the state of Prortaa.
1. The name of the limited liability company is: Fortrepartner Group LLC
2. The mailing address of the limited liability company is :
9445 SW 63rd Court Miami, FL 33156
June 25 2003 L03000023307
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: Business filings Inc.
John Kim Q445 SW 63rd Court 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 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 lif 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
INHS18(10/99) FILING FEE: \$25.00