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OF THE STATE OF STATE



TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: OPENCROM USA INVESTMENT, LLC. (Name of corporation)	
DOCUMENT NUMBER:	
The enclosed Statement of Change of Registered Office/Agent and fee are	submitted for filing.
Please return all correspondence concerning this matter to the following:	
JOHNY BENACERRAF	Q 2
(Name of person)	
OPENCROM USA INVESTMENT, LLC.	
(Name of firm/company)	2
20822 NE 32 AVENUE (Address)	OF JUN 17 PH 2:59
AVENTURA, FL 33180	
(City/state and zip code)	
For further information concerning this matter, please call:	
JOHNY BENACERRAF at (30 (A)	5) 931-5956 rea code & daytime telephone number)
	ea code te daytime telephone nameely
Enclosed is a \$35.00 check made payable to the Department of State.	
Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallebassas FL 22200



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 7, 2004

JOHNY BENACERRAF OPENCROM USA INVESTMENT, LLC 20822 NE 32 AVENUE AVENTURA, FL 33180

SUBJECT: OPENCROM USA INVESTMENT, LLC

Ref. Number: L03000024588

OF THE LARY OF STATE OR OF STATE OR OF CORPORATIONS

We have received your document for OPENCROM USA INVESTMENT, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is an LLC. Enclosed is the proper form for your entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Letter Number: 904A00038704

Lee Rivers Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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 limite	ed liability company is:	OPENCRO	M USA INVES	IMENT, LLC
2. The mailing address of	f the limited liability co	omnany is 20	0822 NE 32 AV	ENUE
		,punny 15 /		
AVENTURA, FL 33180	<u> </u>	<u> </u>	4	·
09/25/2002		,	P0300002\$588	į
3. Date of filing/registrat	ion in Florida	$\bar{4}$. Document num	ber
5. The name of the registe Florida Department of				
	201 S.BISCAYNE	BLVD, 34TH	FLOOR	
	MIAMI, FL 33131	Address		
	•	State and Zip		0 1
6. The name and address	of the new registered a	gent and/or off	fice:	
	JOHNY BENACER	RRAF		王号
	20822 NE 32 AVE	Name VUE		O4 JUH 17 PM 2:59
	Florida street addres	s (P.O. Box No	OT acceptable)	? 2
	AVENTURA	gr 33180		59 Es
•	City. S	State and Zip		. · · · · · · ·
If the limited liability conconfirmed that after the cand the business office of liability company, it is he the members of the limite the operating agreement (Signature of a manufactor author JOHNY BENACERRA (Printed or typed name of signee)	hange or changes are method the registered agent were the registered agent were distributed that the company or of the product of a member	nade, the Floridill be identical, change(s) was as otherwise prompany.	of the State of Fi la street address of Or, in the case of s/were authorized rovided in the art	lorida, it is hereby of the registered office of a Florida limited I by an affirmative vote of icles of organization or
, ,,		roomt and acres	a to act in this ca	nacity I further garee to
I hereby accept the appo comply with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm			• · · · · · · • · · · · · · · · · · · ·	
Divisio	on of Corporations, P.	<u>.</u>		34314
INHS18(10/99)	FILI	NG FEE: \$25.0	00	