20	2004 LIMITED LIABILITY COMPANY					FILED Jul 26, 2004 8:00 am Secretary of State				
DOCUMENT # L03000033865					07-26-2004 90135 006 ***150.00					
Entity Name						07-2	0-2004 901.	55 000	130.00	
99 BOCA RA	e of Business <sub>il</sub> ITON ROAD , FL 33432 <sup>°</sup>	Mailing Address 199 BOCA RATON ROAD BOCA RATON, FL 33432				14060	)079			
Principal Pl	ace of Business Boch Aurow NP	3. Mailing Address しいし そうろってい	A RAJON	R Ø						
Suite, Apt. #		Suite, Apt. #, etc.			07202004	Chg-LLC	CR2E08	3 (10/03)		
City & State	NOTON FL	City & State Bock no JON			4. FELNumb	· /63726	; 1		plied For t Applicable	
Zip -33-13	6. Name and Address of Current I	Zip Period Agent	-USN_	-	and the second	of Status Desire		5.00 Add		
301 WES	CROWN, P.A. T PALMETTO PARK ROAD	NameANTH			7. Name and Address of New Registered Agent DNY VIA-E (P.C. Box Number-is Not Acceptable) BO(D) Ka JUN IZ U					
04-B OCA RAT	ON, FL 33433					~~ ) ***				
The above	named entity submits this statement for	the number of changing its re-	City	Bac		,	FL	Zip Code	/33	
the obligatie	ons of registered agent		Registered Agent signatu	-				ס/ס	- <u>-</u>	
Fili Due b	ing Fee is \$50.00 y September 8, 2004						lake check pa ida Departme	-	•	
	MANAGING MEMBE		10.			ADDITIO	NS/CHANGES			
LE ME REET ADDRESS Y - ST - ZIP	MGRM VAZ, ANTHONY 199 BOCA RATON ROAD BOCA RATON, FL 33432	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	11	ANTHON E BO	CA RATU	N 120 32472	🗋 Change	Addition	
le Me Reet adoress	MGRM LEVY, DEŠMOND 199 BOCA RATON ROAD	Delete	TITLE NAME STREET ADDRESS	the n Levy	M Des nom	CATON NATON TON FL	RU	🗋 Change	Addition	
Y-ST-ZIP	BOCA RATON, FL 33432		CITY-ST-ZIP	Bee	a Kni	oh Lr	33732	/		
LE ME REET ADDRESS Y - ST - ZIP	- 	Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP					Change	Addition -	
LE ME REET ADDRESS Y - ST - ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					🗌 Change	Addition	
LE ME REET ADDRESS Y-ST-ZIP	0 - - -	Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP				<del></del>	Change	Addition	
LE ME REET ADDRESS Y - ST - ZIP	2	Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP					Change	Addition	
I. I hereby c indicated limited liat	ertify that the information supplied with on this report is true and accurate and bility company or the receiver or trustee URE: SIGNATURE AND TYPED OR PRINTED NAME OF	that my signature shall have the empowered to execute this re	he exemption stat e same legal effe port as required t	ct as if m by Chapti	ade under oat er 608, Florida	(i), Florida Statute h; that I am a ma Statutes. X 7 Date	es. I further certinaging member	fy that the in or manage	formation r of the	