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ALLAHASSET LINES

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

l. Nar	ne of the limited liability company:CUTUre		1ed	iators	LLC
2 (a)	400 NE 31d	(b)	ر	100 NF	3rd 5T
(47 _	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(47)		Mailing address	of limited liability company: BE POST OFFICE BOX)
	Pomponu Beach FL 33060		Pom	paro Beo	LFC 33060
_	09/26/2003	-	40	30000 3	86728
3.	Date of filing/registration in Florida	4.		Document n	umber
5 (a)	KEVIN SLOAT				
. (2)	Registered Agent and Registered Office shown on the records of the	: Florida !	Dept. of S	tate:	
	400 NE 3rd ST				
	Registered Office Address (MUST BE FLORIDA STREET AD	DRESS)			 1
					ALL Moch
	0 1				≥ 600 ×
	Pompono Beach .FL		<u>060</u>		hongy of
	CHOICE OUCA A FIEDO				Ten -
(b) _.	CHRISTOPHER REESOR Enter name of NEW Registered Open (and) or NEW Registered Open (and) open	ffice add			水生",13e3-11
			<u> </u>		
	1414 N 63 Rd AVE.				5. 6.
	NEW Registered Office Address:				
	Hollywood FL 330	2.4			
	Trong Wood TE 350				
the char agent w was/wei	mited liability company is not organized under the laws age or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of these of organization or the operating agreement of the li	ne regist fility con the limi	tered off mpany, i ted liabi	fice and the bus it is hereby con lity company o	iness office of the registered firmed that the change(s)
	HUDANO	_K	±V1 <i>I</i> J	SLOAT	M G R M
Signatu	are of a member of authorized representative of a member			Printed or typ	ed name of signee
I hereb	y accept the appointment as registered agent and agree ins of all statutes relative to the proper and complete p	eto act	in this co	apacity, I furth	ner agree to comply with the

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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent