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DIVISION OF CORPORATIONS OF JUN 30 AM 11: 25

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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.

1. The name of the limited liability company is:	22BEEREAR LLC
2. The mailing address of the limited liability company is:	9715 BAVANNAH ESTATES DRIVE
LAKE WORTH, FL 3346:	<u>-</u>
10 20 2003 3. Date of filing/registration in Florida	L03000040997
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the registered office a Florida Department of State:	11 0-
JEFFROY A	HILLIEN &
Soca Ration City, State and Zi	STREET & SE
Address Address	E1 27424 8 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
City, State and Zi	P P P P P P P P P P P P P P P P P P P
6. The name and address of the new registered agent and/or o	ffice:
JEFFREY G	FL 33434 30 SAFER STREET STREE
JEFFREY G 9715 CAVANNAH Florida street address (P.O. Box I	ESTATES DRIVE
	T 1
LAKE WORTH FL 3 City, State and Zip	3467
•	
If the limited liability company is not organized under the law confirmed that after the change or changes are made, the Flor and the business office of the registered agent will be identical liability company, it is hereby confirmed that the change(s) we the members of the limited liability company or as otherwise the operating agreement of the limited liability company.	ide street address of the registered office
(Signature of a repender or authorized representative of a member)	
(Printed or typed name of signee)	
I hereby accept the appointment as registered agent and agree comply with the provisions of all statutes relative to the proper and I am familiar with and accept the obligations of my position of the computer 508, F.S. Or, if this document is being filed to merel address, I hereby confirm that the limited liability company his	e to act in this capacity. I further agree to and complete performance of my duties, ion as registered agent as provided for in y reflect a change in the registered office as been notified in writing of this change.
(Signature of Registered Agent)	
Division of Corporations, P.O. Box 6327.	, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18(10/99)