L03000043739

| (Requestor's Name) |
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| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
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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: | ine Accessories usa LLC |
|--|--|
| 2. The mailing address of the limited liability compar | |
| November 10, 2003 3. Date of filing/registration in Florida | LO30000 43739 4. Document number |
| 5. The name of the registered agent and the registered Florida Department of State: Nar. 11380 Pros. Addr. Palm Bec. City, State | office address as shown on the records of the Creations ne percty Farms Rd 2215 ress RCH Gardens FL 33146 rand Zip |
| 6. The name and address of the new registered agent a Vancisco Name 2001 Cata Florida street address (P.C. Miami FL City, State a | Thorwell Fina Street Story |
| If the limited liability company is not organized under confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the chan the members of the limited liability company or as of the operating agreement of the limited liability company (Signature of a member or authorized representative of a member) | the Florida etreet address of the registered office |
| (Printed or typed name of signee) I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of a Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability con | and agree to act in this capacity. I further agree to ne proper and complete performance of my duties, ny position as registered agent as provided for in so merely reflect a change in the registered office npany has been notified in writing of this change. |

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18(10/99)

(Signature of Registered Agent)