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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: FRA	N KABAGELLE
2. The mailing address of the limited liability company is	: 320 EAST 58th Street
NewYork My 10022	
12/16/03	
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the registered office Florida Department of State: Registered Agent Name 100 SE 2nd So Address Miami FL 33 City, State and	the address as shown on the records of the Sof Florida LLC meet, Suite 2900
6. The name and address of the new registered agent and/o	or office:
Lee Hallgren 16520 Name HR bo Florida street address (P.O. Bo T Myers FL 3 City, State and Z	x NOT acceptable)
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwithe operating agreement of the limited liability company. (Signature of a member or authorized representative of a member)	Torida street address of the registered office tical. Or, in the case of a Florida limited
(Printed or typed name of signee)	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the praid I am familiar with and accept the obligations of my pochapter 508, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compan	agree to act in this capacity. I further agree to oper and complete performance of my duties, sistion as registered agent as provided for in crely reflect a change in the registered office y has been notified in writing of this change.

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

INHS18(10/99)

(Signature of Registered Agent)

FILING FEE: \$25.00