

L04000008273

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Sales of the sales ACCOUNT NO. : 072100000032 162321A REFERENCE AUTHORIZATION COST LIMIT ORDER DATE: June 29, 2005 ORDER TIME : 10:42 AM ORDER NO. : 457139-010 CUSTOMER NO: 162321A CUSTOMER: Ms. Alison Sutorius Simon Meyrowitz & Meyrowitz, 12th Floor 470 Park Ave South New York, NY 10016 CHANGE OF AGENT NAME: HAMMOCK LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___CERTIFIED COPY XX PLAIN STAMPED COPY CONTACT PERSON: Darlene Ward -- EXT# 2935 EXAMINER:

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: HAMMOCK LLC
2. The mailing address of the limited liability company is:
18851 NE 29th Avenue, Suite 700, Aventura, FL 33180
January 23, 2004 L04000008273
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Georgia Rogers
Name
3650 Environ Boulevard, Unit 501
Address Graduation
Lauderhill, FL 33319
City, State and Zip
6. The name and address of the new registered agent and/or office:
Gary Rogers
Name
18851 NE 29th Avenue, Suite 700
Florida street address (P.O. Box NOT acceptable)
Aventura FL 33180
City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.
(Signature of a member or authorized representative of a member)
Gary Rogers, Member (Printed or typed name of signee)
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 608, P.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.
(Signature of Registered Agent) Lary Rogers
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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