L040000/6583

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JUN 2 0 2008

EXAMINER

COVER LETTER

TO:	ΓO: Amendment Section Division of Corporations					
SUBJECT: WILTON MANORS GROUP, LLC (Name of Corporation)						
	·	•				
DOCU	UMENT NUMBER: L04000016583					
The end	nclosed Statement of Change of Registered Office/Ag	ent and fee are submitted for filing.				
Please	return all correspondence concerning this matter to the	ne following:				
		-				
	BRIAN R. FRENCH					
(Name of Contact Person)						
LAW OFFICE OF DEAN TRANTALIS						
	(Firm/Compa	ny)				
	2255 WILTON DRIVE					
	(Address)					
WILTON MANORS, FL 33305 (City/State and Zip Code)						
Б С	` *	p code)				
For fur	rther information concerning this matter, please call:					
BRIAN	N R. FRENCH at	(954) 566-2226 (Area Code & Daytime Telephone Number)				
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)				
Enclosed is a \$35.00 check made payable to the Department of State.						
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.0502, nge is submitted for a corporation organize				
	r to change its registered office or registere				
1. The name of t	he corporation: WILTON MANORS GROU	P, LLC			<u> </u>
2. The principal	office address: 2740 N. ANDREWS AVEN	UE, WILTON MANORS, FL 33311			
	2740 N. ANDDEWE	AVENUE WILTON MANIODS ELS	2211		
3. The mailing a	ddress (if different): 2740 N. ANDREWS	AVENUE, WILTON MANORS, ILE	30011		
4. Date of incorp	oration/qualification: 10/17/2004	Document number: L040000165	i83		
	street address of the current registered age tment of State:	nt and registered office on file with the	ie		
	ASIA LUCCHESE				
	2406 TORTUGAS LANE		38 80		
	FORT LAUDERDALE, FL 33312		CRET	MUL	الت
6. The name and (if changed):	street address of the new registered agent	(if changed) and /or registered office	ARY OF S	19 PM	
	GUSTAVO SANCHEZ		ORID	$\dot{\omega}$	
	2740 N. ANDREWS AVENUE		A	02	
	(P.O. Box NOT acceptable)				
	WILTON MANORS, FL 33311				
The street address changed will	ss of its registered office and the street ac be identical.	ddress of the business office of its re	gistered	l agent	ļ ,
Such change was authorized by th	is authorized by resolution duly adopted be board, or the corporation has been noti	by its board of directors or by an off fied in writing of the change.	icer so		
Lus	re of an officer of director)	GUSTAVO SANCHEZ (Printed or typed name and title)			
• • •	the appointment as registered agent and o comply with the provisions of all statut d I am familiar with and accept the obliging filed merely to reflect a change in the been notified in writing of this change.	• • • • • • • • • • • • • • • • • • • •		ormand r, if th that th	e is e
fust (SI)	gnature of Registered Agent)	May 20, 20	108		
If signing on be	half of an entity:	•			
GUSTAVO S					
(*	'yped or Printed Name)	ን መንድ ለስ ፋ ፋ ፋ			
	* * * FILING FEE	/: ♪>>.UU * * * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)