L04000028926

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To:
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Fax Number : (850)205-0380

From:
Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

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REGISTERED AGENT CHANGE

LIMAGLO, LLC

Certificate of Status	0
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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

June 8, 2004

LIMAGLO, LLC
4349 S.W. 147TH COURT
MIAMI, FL 33185

SUBJECT: LIMAGLO, LLC
REF: L04000028926

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Letter Number: 804A00038834

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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: Limaglo, LLC

2. The mailing address of the limited liability company is : 4349 S.W. 147th Court
Miami, Florida 33185

April 14, 2004 — 3. Date of filing/registration in Florida

L04000028926 — 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:

Rolanc Sanchez-Medina Jr.
Name

Colonnade Suite 302 2333 Ponce De Leon
Address

Blvd. Coral Gables, Florida 33134
City, State and Zip

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6. The name and address of the new registered agent and/or office:

Maria Gomez
Name

4349 S.W. 147th Court
Florida street address (P.O. Box NOT acceptable)

Miami, Florida 33185 FL
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)

MARIA E. GOMEZ
(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, F.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)

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