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SECRETARY OF STATE DIVISION OF CORPORATIONS

## COVER LETTER

TO: Registration Section - Division of Corporations	
SUBJECT: PMW Truestments LLC (Name of Limited Liability Company)	
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Faul M. Whales (Name of Person)	ii u
PMW Investments, LLC Venture Company) 200 S. Fark Road - Suite 320 (Address) Hoffwood, Fl 33021 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Taul M. Whaten at (954) 963-7120 / Ext. (Name of Person) (Area Code & Daytime Telephone N	21 umber)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:	
\$25 Filing Fee \$\tag{\$55 Filing Fee & Certified Copy}	

## 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:	V-Investment	5. UC
2. The mailing address of the limited liability company is		porate Center II
200 S. Park Road - Suite 320 -	Hollywood, F	L 33021
5-14-2004	104000	0036929
3. Date of filing/registration in Florida	<ol><li>Document numl</li></ol>	ber
5. The name of the registered agent and the registered office Florida Department of State:    Pau	treet-Suite 3. L 33021	SECRE DIVISION OF AUG
6. The name and address of the new registered agent and venture Componer 200 5. Fark Roe Florida street address (P.O. Be	or office: The Couter IL ad-Suite 320	FILED STATE OF CORPORATIONS -7 PM 1:07
Holy wood, FL City, State and 2	330H Zip	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be identiability company, it is hereby confirmed that the change of the members of the limited liability company or as other the operating agreement of the limited liability company.  (Signature of a member or authorized representative of a member)	Florida street address on tical. Or, in the case on s) was/were authorized	of the registered office of a Florida limited I by an affirmative vote
Payl M. Whalen (Printed or typed name of signee)	<u></u>	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, I this document is being filed to maddress, I have by comfirm that the limited liability companyal.	agree to act in this cap roper and complete pe sosition as registred a serely reflect a change ny has been notified in	pacity. I further agree to rformance of my duties, gent as provided for in in the registered office writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

(Signature of Registered Agent) Ry M. Whalen