## **FILED** Jul 06, 2006 08:00 AM Secretary of State

Applied For Not Applicable Additional

with, and accept

20			Secreta		
DOCUMENT # L04000038370  1. Entity Name 770 U.S.A., L.L.C.					
Principal Place 2320 NE 198 NORTH MIAM		Mailing Address 2320 NE 196TH STREET NORTH MIAMI BEACH, FL			
O	O NOT WRI	TE IN THIS SI	PACE	06302006No Chg-LLC  4. FEI Number 20-1517235	CR2E083 (11
	6. Name and Address of Cur	rent Registered Agent		5. Certificate of Status Desired	Fee Re
				DO NOT W IN THIS SP	18:5-48:32.22.3
the obligat	named entity submits this statement ions of registered agent.	ent for the purpose of changing its re	egistered office or registe	red agent, or both, in the State of Flo	rida. I am familiar
SIGNATURE Fil Due I	Signature, typed or printed name of registered ling Fee is \$50.00 by September 6, 2006	agent and title if applicable. (NOTE:	logistered Agent argneture require	J when reinstating)	DATE
9.	MANAGING ME	MBERS/MANAGERS	<b>一种的数据</b>	<b>"那"。据汉德·邓德·斯</b> 德	有等物的效应
TITLE	MGRM				
NAME	ROSEMBLAT, GUSTAVO		<b>非特别</b>		
STREET ADDRESS CITY-ST-ZIP	2320 NE 196TH STREET NORTH MIAMI BEACH, FL	33180			000568106
	NON IT MINMI DEAUT, FL	33100		.745.72	06780000970
TITLE			<b>。                                    </b>	· 对到4.2.99的5马进移之46回6.12mg/36	Jan Habitan Kulbi il

## DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CATY-ST-ZIP THE NAME STREET ADDRESS CITY-ST-ZIP

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