L04000062313

Fisher & Lawrence, P.A. 80 NE 168th St North Miami Beach, FL 33162								
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(City/State/Zip/Phone #)								
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FILED 2005 MAY 31 P 1: 15 SECRETARY OF STATE

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 limite	d liability company is:	FATHER & SON INVESTME	ENTS, LLC.				
		mpany is: 80 NE 168th Street					
North Miami Beach, FL							
08/23/2004		L04000062313					
3. Date of filing/registrati	on in Florida	4. Document number	 er				
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Fisher & Lawrence, P.A.							
	Name et, Suite 201						
	North Miami, FL 331	Address					
6. The name and address of the new registered agent and/or office:							
Fisher & Lawrence, P.A.							
-							
	North Miami Beach,	FL 33162					
•	City, St	ate 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 mitted 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 progratization or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member) Joshua Fisher (Printed or typed name of signee)							
- · ·	ntment as registered ago s of all statutes relative l accept the obligations lis document is being fil that the limited liability	ent and agree to act in this capa to the proper and complete perfo of my position as registered age led to merely reflect a change in company has been notified in w	city. I further agree to ormance of my duties, nt as provided for in the registered office riting of this change.				
(Signature of Registered Agent)							

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

INHS18(10/99) FILING FEE: \$25.00