

...L04000068046

Fowler Rodriguez Valdes-Fauli
(Requestor's Name)

355 Alhambra Circle, Ste 801
(Address)

Poral Gables, FL 33134
(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

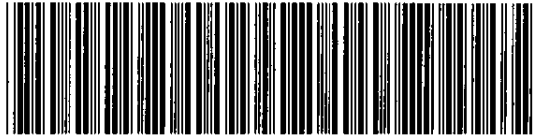
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500136914365

10/20/08--01028--003 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 OCT 20 PM 1:45

J. BRYAN

OCT 21 2008

EXAMINER

**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. Name of the limited liability company: MIAMI HAND CENTER, PL

2. (a) Principal office address of limited liability company: 8905 SW 87TH AVENUE, SUITE 100
(Note: **MUST BE STREET ADDRESS**) MIAMI, FL 33176

(b) Mailing address of limited liability company: 8905 SW 87TH AVENUE, SUITE 100
(Note: **MAY BE POST OFFICE BOX**) MIAMI, FL 33176

SEPTEMBER 17, 2004

3. Date of filing/registration in Florida

L04000068046

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

ALAN R. CHASE, ESQ.

Registered Office Address:

9400 S. DADELAND BOULEVARD
SUITE 600
MIAMI, FL 33156

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

MICHAEL A. ROSEN, ESQ.

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

355 ALHAMBRA CIRCLE

SUITE 801

CORAL GABLES, FL 33134

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]
(Signature of a member or authorized representative of a member)

[Printed Name]
(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]
(Signature of Registered Agent)

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

INHS18 (05/08)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 OCT 20 PM 1:46