

LD4000076945

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

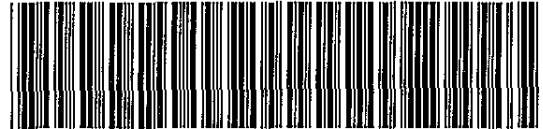
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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LD4-76945
[Signature]



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

October 7, 2005

EDGARDO ARAUZ
400 ALTON RD #1605
MIAMI BEACH, FL 33139

SUBJECT: ARAZA INVESTMENTS LLC
Ref. Number: L04000076945

We have received your document for ARAZA INVESTMENTS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 205A00061024

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

September 28, 2005

EDGARDO ARAUZ
400 ALTON RD #1605
MIAMI BEACH, FL 33139

SUBJECT: ARAZA INVESTMENTS LLC
Ref. Number: L04000076945

We have received your document for ARAZA INVESTMENTS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 205A00059112

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ARAZA INVESTMENTS LLC
(Name of Corporation)

DOCUMENT NUMBER: L04000076945

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

EDGARDO M. ARAUZ
(Name of Contact Person)

ARAZA INVESTMENTS LLC
(Firm/Company)

400 ALTON RD # 1605
(Address)

MIAMI BEACH FL 33139
(City/State and Zip Code)

For further information concerning this matter, please call:

EDGARDO M. ARAUZ at 305 672 0770
(Name of Contact Person) (Area Code & Daytime Telephone Number)
305 519 8489

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ARAIZA INVESTMENTS 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:

Edgardo M. Arauz
(Name of Person)

ARAIZA INVESTMENTS LLC
(Firm/Company)

400 ALTON ROAD # 1605
(Address)

MIRIAM BEACH Florida 33139
(City/State and Zip Code)

For further information concerning this matter, please call:

Edgardo M. Arauz at (305) 672-0770
(Name of Person) (Area Code & Daytime Telephone Number)

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

\$55 Filing Fee & Certified Copy

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TALLAHASSEE, FLORIDA

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: ARAZA INVESTUENTS LLC
2. The mailing address of the limited liability company is : 400 Alton Road # 1605
MIAMI BEACH Florida 33139
3. Date of filing/registration in Florida 10/22/2004
4. Document number L04000076945

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Edgardo M. Arauz
Name
400 Alton Road # 1605
Address
Miami Beach Florida 33139
City, State and Zip

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

Edgardo M. Arauz
Name
400 Alton Road # 1605
Florida street address (P.O. Box NOT acceptable)
Miami Beach FL 33139
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.

Edgardo M. Arauz
(Signature of a member or authorized representative of a member)

Edgardo M. ARAUZ
(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.

Edgardo M. Arauz
(Signature of Registered Agent)

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

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2005 OCT 22 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA