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## STACEY P. COHAN

Attorney at Law

55 FIFTH AVENUE - 15TH FLOOR NEW YORK, NEW YORK 10003

TELEPHONE: (212) 206-6118 FACSIMILE: (212) 727-0563

June 6, 2005

Sincerely

ohan

MS JUN 13 PM 1: 42

BY REGULAR MAIL
Florida Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Susan WPB Equities LLC
Clinton Hill WPB Equities LLC
TEA WPB Equities LLC

CH WPB Equities LLC
TC WPB Equities LLC

Gentlepersons:

Enclosed please find a "Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company" for each of the above referenced entities, together with a check made payable to "Division of Corporations" in the amount of \$125.00 representing the aggregate filing fee for same.

Please telephone with any questions.

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## 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: Susan WPB	Equities LLC
2. The mailing address of the limited liability company is : 55	
New York, New York 10003	·
November 18, 2004	_04000084061
3. Date of filing/registration in Florida 4.	Document number
5. The name of the registered agent and the registered office add Florida Department of State:  Angell Corporate Services, Inc.	C B
Name One North Clematis Street, Suite	400
Address West Palm Beach, FL 33401	400 FILE
City, State and Zip	His H
6. The name and address of the new registered agent and/or office	se:
Lee Solomon, Esq.	
19538 Bayview Road	
Florida street address (P.O. Box NO	T acceptable)
Boca Raton FL 33434	
City, State and Zip	<del></del>
If the limited liability company is not organized under the laws of confirmed that after the change or changes are made, the Florida and the business office of the registered agent will be identical. liability company, it is hereby confirmed that the change(s) was/the members of the limited liability company or as otherwise prothe operating agreement of the limited liability company.  (Signature of a member or authorized representative of a member)	street address of the registered office Or, in the case of a Florida limited were authorized by an affirmative vote of
Stacey P. Cohan, Authorized Representative (Printed or typed name of signee)	

(Signature of Registered Agent)

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

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.

INHS18(10/99)

**FILING FEE: \$25.00**