1040000 86275

(Re	equestor's Name)	
Richard Reichek 4141 Parnona Ave. Miami, FL 33133-6326		
(v. vene vene)		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer.	
		1

Office Use Only



900043731239

01/07/05--01008--002 **25.00

FILEU 2005 JAN -7 PH 12: 05 SECRETARY OF STATE

104-862-15

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:	LEXINGTON TRADING GROUP, LLC
	ompany is: 1929 NORTH VALLEY STREET
	BURBANK CA 91505
11/30/2004	LD04000086275
3. Date of filing/registration in Florida	4. Document number
Florida Department of State:	stered office address as shown on the records of the
SELZ, STEVEN	<u>`</u>
214 BRAZILIAN	Name NAVENUE
PALM BEACH	Address FL 33480 , State and Zip
6. The name and address of the new registered a	•
SELZ, ROBERT	
717 LAYNE BLV	Name D.
Florida street addres	s (P.O. Box NOT acceptable)
Hallandale Beach	_{FL} 33009
City, S	State and Zip
If the limited liability company is not organized confirmed that after the change or changes are mand the business office of the registered agent w liability company, it is hereby confirmed that the the members of the limited liability company or the operating agreement of the limited liability company or the operating agreement of the limited liability of a member of authorized representative of a memb	87 2: S
(Printed or typed name of signee)	
I hereby accept the appointment as registered a comply with the provisions of affistatules relative and I am familiar with and accept the obligation Chapter 608, F.S. Or, if this document is being ackirets. I hereby confirm that the limited liability (Signature of Registered Agent)	gent and agree to act in this capacity. I further agree to e to the proper and complete performance of my duties, as of my position as registered agent as provided for in filed to merely reflect a change in the registered office ty company has been notified in writing of this change.

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

INHS08(10.99)

FILING FEE: \$25.00