

104000089263

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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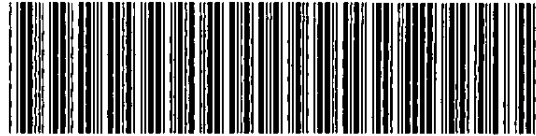
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DB

12/26

**SULU05, L.L.C.**  
**1541 BRICKWELL AVE., APT. 1807**  
**MIAMI, FL 33129**

Diciembre 11, 2007

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

To Whom It May Concern:

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:

Daniel E. Apodaca  
(Name of Contact Person)

Apodaca and Company  
(Firm/Company)

301 E. Colorado Blvd., Ste 800  
(Address)

Pasadena, CA 91101  
(City/State and Zip Code)

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**TALLAHASSEE, FLORIDA**

For further information concerning this matter, please call:

Daniel E. Apodaca at (626) 449-6262  
(Name of Contact Person) (Area Code & Daytime Telephone Number)



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 3, 2007

DANIEL E. APODACA  
APODACA AND COMPANY  
301 E. COLORADO BLVD., STE 800  
PASADENA, CA 91101

SUBJECT: SULU05, L.L.C.  
Ref. Number: L04000089263

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for SULU05, L.L.C. 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) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 707A00068200

**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: SULU05, LLC
2. The mailing address of the limited liability company is: 301 E. COLORADO BLVD.,  
SUITE 800 PASADENA, CA 91101

12/09/2004

L04000089263

3. Date of filing/registration in Florida

4. Document number

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

PRATZ FERNANDEZ & CO PA

2121 PONCE DE LEON BLVD., STE 240

CORAL GABLES, FL 33134

City, State and Zip

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

SUSANA DOSAMANTES

Name

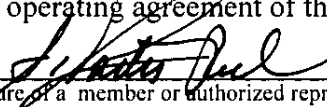
1541 BRICKELL AVE., APT. 1807,

Florida street address (P.O. Box NOT acceptable)

MIAMI, FL 33129

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.

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

SUSANA DOSAMANTES  
(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 of Registered Agent)

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

**FILED**  
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TALLAHASSEE, FLORIDA