1. Entity Nam	MENT	#L040000	IABILITY CON Al Report 93736		7	SECRETARY ALLAHASSEE	AM 10: 43 OF STATE FLORIDA	
	ce of Business ELL AVENUE, 13131	STE. 1800	Mailing Address 1200 BRICKELL AVEN MIAMI, FL 33131	NUE, STE. 1800			- INDA	
2. Principal Place of Business		3. Mailing Address	As 1					
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.		02142005	02142005 Chg-LLC CR2E083 (10/03)		
City & Stat	te		City & State	$\gamma/\sim$	4. FEI Numl	<sup>2er</sup> 05-06	13853	Applie Not Ap
Zip		Country	Zip	Country	·	e of Status Desired		
	6. Name a	and Address of Cur	rent Registered Agent	Name	7. Name an	d Address of New F	Registered Agent	
MARTIN, PEDRO A 1200 BRICKELL AVENUE, STE. 1800			D	Street Addre	Street Address (P.O. Box Number is Not Acceptable)			
MIAMI, FL	33131							
the obligat	tions of registe	red agent.	Int for the purpose of changing it egent and title if applicable. (NO	City Is registered office or rec TE: Registered Agent signature re	_	Mal		h, and
the obligat SIGNATURE Fi D	tions of registe	printed name of registered \$50.00 1, 2005	agent and itile il applicable. (NO	ts registered office or reg TE: Registered Agent signature re	_	Ma) Florid	DATE DATE ke check payable to a Department of St	h, and
the obligat SIGNATURE	Signature, typed o illing Fee is ue by May MGR MARTIN, F 1200 BRIC	red agent. printed name of registered \$50.00 1,2005 MANAGING ME EDRO A KELL AVENUE, S	egent and title if applicable. (NO MBERS / MANAGERS	ts registered office or rec	_	Ma) Florid	DATE	h, and
the obligat SIGNATURE <b>F</b> D 9. TITLE NAME STREET ADDRESS	Signature, typed o Signature, typed o Illing Fee is ue by May MGR MARTIN, F	red agent. printed name of registered \$50.00 1,2005 MANAGING ME EDRO A KELL AVENUE, S	egent and title if applicable. (NO MBERS / MANAGERS	TE: Registered Agent signature re TE: Registered Agent signature re 10. TITLE NAME STREET ADDRESS	_	Ma) Florid	DATE bate check payable to a Department of St /CHANGES	h, and
the obligat SIGNATURE <b>9.</b> TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed o illing Fee is ue by May MGR MARTIN, F 1200 BRIC	red agent. printed name of registered \$50.00 1,2005 MANAGING ME EDRO A KELL AVENUE, S	egent and title if applicable. (NO MBERS / MANAGERS Delete TE. 1800	TE: Registered Agent signature re TE: Registered Agent signature re 10. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS	quired when reinstaling)	Ma) Florid ADDITIONS	CHANGES	h, and
the obligat SIGNATURE 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed o illing Fee is ue by May MGR MARTIN, F 1200 BRIC	red agent. printed name of registered \$50.00 1,2005 MANAGING ME EDRO A KELL AVENUE, S	egent and title if applicable. (NO MBERS/MANAGERS Delete TE. 1800 Delete	TE: Registered Agent signature re TE: Registered Agent signature re TI: Registered Agent signature re TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	quired when reinstaling)		CHANGES	h, and
the obligat SIGNATURE 9. 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed o illing Fee is ue by May MGR MARTIN, F 1200 BRIC	red agent. printed name of registered \$50.00 1,2005 MANAGING ME EDRO A KELL AVENUE, S	agent and title if applicable. (NO MBERS / MANAGERS Delete TE. 1800 Delete Delete	TE: Registered Agent signature re TE: Registered Agent signature re TTE: Registered Agent signature re TTE: Registered Agent signature re TTE Registered	quired when reinstaling)		DATE DATE Ke check payable to a Department of St /CHANGES Change	h, and