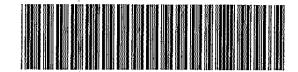
## L0500005051

CAVITCH FAMILO DURKIN & FRUTKIN					
Fourteenth Floor 1717 East Ninth Street Cleveland, OH 44114-2876					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



200055962992

05/13/05--01010--018 \*\*25.00

05 JUN 13 PM 1:3 SECRETALL STATE TALLAHASSEE, FLORID

## 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 limite	ed liability company is: Winsto	n HB, LL	C	
	f the limited liability company is			jhway
Fort Lauderdale, FL 3				
January 14, 2005		L050	000005051	
3. Date of filing/registration in Florida		4. Do	cument number	
5. The name of the register Florida Department of	ered agent and the registered office State: Andrea Brown	ce address	as shown on the	records of the
	Name 1511 S.E. 2nd Street	The second secon		,
	Address Fort Lauderdale, FL 33301 City, State and	Zin		OS JI SECR
6. The name and address	of the new registered agent and/o	-		FILED JUN 13 PM JAHASSEE, F
	Andrea Brown			E P
	1511 S.E. 2nd Street			I: 37
	Florida street address (P.O. Bo	x NOT ac	ceptable)	Dr J
	Fort Lauderdale FL 333	301	5	
	City, State and Z	Gip		
confirmed that after the cl and the business office of liability company, it is her	npany is not organized under the nange or changes are made, the F the registered agent will be idented to confirmed that the change(s) d liability company or as otherwif the limited liability company.	lorida stre ical. Or, i was/were	et address of the r in the case of a Fl authorized by ar	registered office orida limited affirmative vote of
(Signature of a member or authori	zed representative of a member)	<u></u> **		
Andrea Brown		•	The state of the s	
(Printed or typed name of signee)		<del>-</del>	* Proposition of the Proposition	
	ntment as registered agent and a s of all statutes relative to the pr d accept the obligations of my po his document is being filed to me that the limited liability compan	gree to ac oper and c sition as r rely reflec y has been	t in this capacity. complete perform egistered agent a ct a change in the potified in writin	I further agree to ance of my duties, is provided for in registered office ig of this change.
(Signature of Registered Agent)	<del></del>		AND	

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

INHS18(10/99)

**FILING FEE: \$25.00**