L05000009458

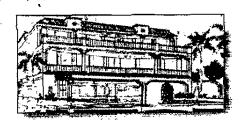
(F	Requestor's	s Name)	
(A	(ddress)		
4)	(ddress)		
(C	ity/State/Z	ip/Phone	#)
PICK-UP	<u></u>	VAIT	MAIL
(E	Business E	ntity Nam	e)
(C	ocument	Number)	<u></u>
Certified Copies	Ce	ertificates i	of Status
Special Instructions to	o Filing Of	ficer:	
		_	
Nome Avadabilit y			
Dagument			
Examiner	DCC	Hea Onti	,
Updater	DCC	Use Only	•
Updater Vertiyer	DOC		
as a man	DOC		
and the second s	DUC		



100045846851

02/07/05--01063--003 ***25.00

2005 FEB - 7 P 3: 35



CARMAN AND SMITH, P.A. ATTORNEYS AND COUNSELORS AT LAW

Deborah A. Carman Andrew M. Smith 165 East Palmetto Park Road Boca Raton, Florida 33432-3936 Telephone: Boca Raton: (561) 392-7031 Broward: (954) 481-9777 Palm Beach: (561) 736-7219 Fax: (561) 750-3896

E-Mail: carmansmithlaw@aol.com

February 4, 2005

Division of Corporations Amendment Section PO Box 6327 Tallahassee, FL 32314

RE: Registered Agent Change

Dear Sir/Madam:

Enclosed please find our check in the amount of \$ 25.00. Please file the enclosed Name change of Registered Agent accordingly.

Thank you,

Kara Strausser

CARMAN AND SMITH, P.A.

SECRETARY OF STATE

2105 FEB -1 P 3: 35

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: LASAN PROPERTIES, LLC 2. The mailing address of the limited liability company is: 6676 BLUE BAY CIRCLE LAKE WORTH, FL 33467 L05000009458 01/28/2005 4. Document number 3. Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Plorida Department of State: LUIS T. SAILLANT 6676 BLUE BAY CIRCLE Address LAKE WORTH, FL 33467 City, State and Zip 6. The name and address of the new registered agent and/or office: ROSSANA R. SAILLANT 6676 BLUE BAY CIRCLE Florida street address (P.O. Box NOT acceptable) RL 33467 LAKE WORTH 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) ROSSANA R. SAILLANT, TRUSTEE (Printed or typed name of signes) 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 dulies, 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

IN11518(10/99)

FILING FRE: \$25.00