

L05000021068

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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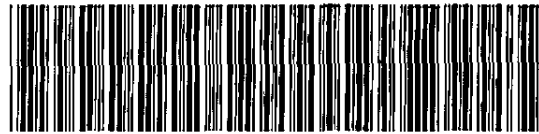
(Business Entity Name)

(Document Number)

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05/04/05--01001--005 \*\*25.00

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

05 MAY -3 AM 7:50

F-11 210

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

05 MAY -3 PM 3:09

RECEIVED

CORPDIRECT AGENTS, INC. (formerly CCRS)  
103 N. MERIDIAN STREET, LOWER LEVEL  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

CONTACT: KATIE WONSCH  
DATE: 05/03/2005  
REF. #: 001384.37566  
CORP. NAME: ZHIVAGO DEVELOPMENT, LLC

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SEC. OF STATE  
TALLAHASSEE, FLORIDA

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION         | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT                     | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME         |
| <input type="checkbox"/> FOREIGN QUALIFICATION             | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input type="checkbox"/> LIMITED LIABILITY       |
| <input type="checkbox"/> REINSTATEMENT                     | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL              |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION       |   |  |
| <input checked="" type="checkbox"/> OTHER: CHANGE OF AGENT |   |  |

STATE FEES PREPAID WITH CHECK# 512462 FOR \$ 25.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

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| <input type="checkbox"/> CERTIFIED COPY        | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS |   |  |

Examiner's Initials

**CHANGE OF REGISTERED OFFICE  
FOR LIMITED LIABILITY COMPANY**

Under F.S. 608.416 or 608.508, the undersigned limited liability company submits the following statement to change its registered office in the state of Florida.

1. The name of the limited liability company is: ZHIVAGO DEVELOPMENT, LLC
2. The mailing address of the limited liability company is: 490 SAWGRASS CORPORATE PARKWAY, SUITE 330, SUNRISE, FLORIDA 33325.
3. The date of filing/registration in Florida is: MARCH 2, 2005

Document number:L05000021068

4. The name and address of the current registered agent and office as shown on the Department of State's records are:

GARY SINGER  
440 N ANDREWS AVENUE  
FORT LAUDERDALE, FL 33301


5. The name and street address of the new registered agent and office are:

GARY SINGER  
490 SAWGRASS CORPORATE PARKWAY, SUITE 330  
SUNRISE, FL 33325


If the limited liability company is not organized under the laws 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. Alternatively, in the case of a Florida limited liability company, it is hereby confirmed that the change was authorized by an affirmative vote of

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TALLAHASSEE, FLORIDA

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.

  
\_\_\_\_\_  
GARY SINGER

Alternatively, 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.

  
\_\_\_\_\_  
GARY SINGER