

LD5000031999

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

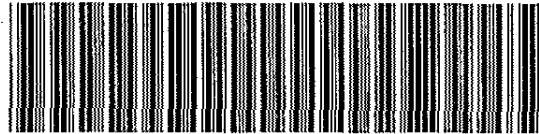
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

LS

Office Use Only



700109558997

09/21/07--01029--019 \*\*35.00

FILED  
2007 SEP 21 PM 1:20  
CLERK OF COURT  
CLERK OF COURT

SANFORD N. REINHARD, P.A.

ATTORNEY AT LAW  
2875 N. E. 19~~15~~ STREET  
SUITE 404  
AVENTURA, FLORIDA 33180

MIAMI  
(305) 932-7555  
TELECOPIER  
(305) 935-5671  
E-MAIL  
sanrein@bellsouth.net

September 18, 2007

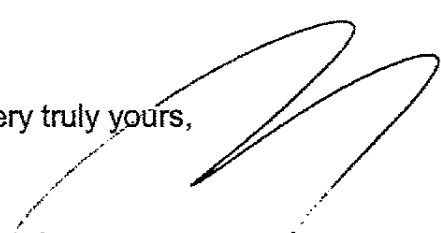
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: INTERNATIONAL SALES GROUP REALTY, LLC

Gentlemen:

We enclose the Statement of Change of Registered Office and Registered Agent for the company, along with a check payable to the Florida Department of State, in the amount of \$25.00, representing the filing fee.

Very truly yours,



Sanford N. Reinhard  
SNR/na

**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: International Sales Group Realty, LLC

2. The mailing address of the limited liability company is : 2875 N. E. 191st Street,  
Suite 200, Aventura, FL 33180

3/31/2005  
3. Date of filing/registration in Florida

L05000031999  
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:

Staci Genet, Esq  
Name  
2875 N.E. 191st Street, Suite 200  
Address  
Aventura FL 33180  
City, State and Zip

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

Sanford Reinhard, P.A.  
Name  
2875 N.E. 191st Street, Suite 404  
Florida street address (P.O. Box NOT acceptable)  
Aventura FL 33180  
City, State and Zip

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2007 SEP 21 PM 1:20

FILED

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)

Philip H. Spiegelman  
(Printed or typed name of signer)

*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