

04-26-2006 90016 022 ****50.00

DOCUMENT # L05000056990 1. Entity Name FAIR WIND REAL ESTATE INVESTMENTS, LLC																																	
Principal Place of Business 530 BRICKELL KEY DRIVE SUITE 0-305 MIAMI, FL 33131		Mailing Address 530 BRICKELL KEY DRIVE SUITE 0-305 MIAMI, FL 33131																															
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country																															
6. Name and Address of Current Registered Agent TRANSGLOBAL CORPORATE ADMINISTRATION, INC. 530 BRICKELL KEY DRIVE SUITE 0-305 MIAMI, FL 33131		7. Name and Address of New Registered Agent Transglobal Corporate Administration, LLC 520 Brickell Key Drive - Suite 0-305 Miami, FL 33131																															
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE: DATE: 04/07/06 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering.)																																	
Filing Fee is \$60.00 Due by May 1, 2006																																	
9. MANAGING MEMBERS / MANAGERS <table border="1"><tr><td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td>Manager Kathy Liao 520 Brickell Key Dr. # 0-305 Miami, FL 33131</td><td>☐ Delete</td></tr><tr><td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td></td><td>☐ Delete</td></tr><tr><td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td></td><td>☐ Delete</td></tr><tr><td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td></td><td>☐ Delete</td></tr><tr><td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td></td><td>☐ Delete</td></tr></table>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Manager Kathy Liao 520 Brickell Key Dr. # 0-305 Miami, FL 33131	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	10. ADDITIONS / CHANGES <table border="1"><tr><td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td>Manager Kathy Liao 520 Brickell Key Drive - Suite 0-305 Miami, FL 33131</td><td>☐ Change ☒ Addition</td></tr><tr><td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td></td><td>☐ Change ☐ Addition</td></tr><tr><td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td></td><td>☐ Change ☐ Addition</td></tr><tr><td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td></td><td>☐ Change ☐ Addition</td></tr><tr><td>TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td></td><td>☐ Change ☐ Addition</td></tr></table>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Manager Kathy Liao 520 Brickell Key Drive - Suite 0-305 Miami, FL 33131	☐ Change ☒ Addition	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 606, Florida Statutes. SIGNATURE: Kathy Liao Kathy Liao Manager 3/29/2006 305 3743800 SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Corporate Phone #																																	