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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: LBN, LLC	
(Name of Lin	nited Liability Company)
	•
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Oregon, D. Book, Too	
Gregory R. Beck, Esq. (Name of Person)	
(Marie et l'elseu)	
Gregory R. Beck, P.A.	
(Firm/Company)	· · · · · · · · · · · · · · · · · · ·
707 Southeast 3rd Avenue, Sixth F	loor
(Address)	
Fort Lauderdale, Florida 33316	
(City/State and Zip Code)	
For further information concerning this matter,	, please call:
Gregory R. Beck, Esq.	at (954) 525-8155
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following	amount:
	\$55 Filing Fee & Certified Copy

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: 1	LBN, LLC .
2. The mailing address of the limited liability com	pany is: 247 S.W. 8th Street, #101
Miami, Florida 33130-3529	
August 1, 2005	L0500076055
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the registe Florida Department of State:	red office address as shown on the records of the
Terrance J. Mullin Name 150 S.E. 2nd Avenue, #1201 Address Miami, Florida 33131 City, State and Zip 6. The name and address of the new registered agent and/or office: Gregory R. Beck, Esq. Name Gregory R. Beck, P.A., 707 S.E. 3rd Avenue, Sixth Floor Florida street address (P.O. Box NOT acceptable)	
	FL 33316
City, Star	te 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)

Roberto Lopez

(Printed or typed name of signee)

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