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J. SAULSBERRY EXAMINER

JAN 6 2011

COVER LETTER

Division of (Corporations				
SUBJECT:	MG INVEST	MENT:	S & ASSOCIATES, L	LC	
	Name of	Limited	Liability Company		
Dear Sir or Madam:	;				
The enclosed Regist	tered Agent/Registered	Office Cl	nange and fee(s) are submit	ted for filing.	
Please return all cor	respondence concernin	g this mat	ter to the following:		
	NICOLE MARTIN				
	Name of Person		•		
	Firm/Company			garring	
				2011	
{	8880 SW 113 AVE	 		AAAA AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	
	Address				T B Harrican
				55 5	A PARTY
	MIAMI FL 33176			E FE	
(City/State and Zip Code				Section 1
				2: L	
I FNN	X XYV12@YAHOO.CO be used for future annual report	M	•	夏州 ち	
E-mail address: (to b	e used for future annual report	notification)		
For further informat	ion concerning this ma	tter, pleas	e call:		
	E MARTIN	at (305) (305) 27		
Name	of Person		Area Code & Daytime Telep	none Number	
Registration S Division of Co Clifton Buildi	orporations ing ve Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is	a check for the followi	ing amou	nt:		
 √ \$25 Filing	g Fee	Γ	\$55 Filing Fee & Certifi	ied Copy	

TO: Registration Section

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.

Name of the limited liability company:MG INVE	ESTMENTS & ASSOC	CIATES, LLC	
2. (a) Principal office address of limited liability compan	y:		
(Note: MUST BE STREET ADDRESS)	13851 SW 38 ST MIAM	II FL 33175	
(b) Mailing address of limited liability company:	40054 OW 00 OT MANA		
(Note: MAY BE POST OFFICE BOX)	13851 SW 38 ST MIAM	II FL 33175	
08/04/2005	L05000076	967	
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on	the records of the Florida D	ept. of State:	
Registered Agent:	MIGUEL MARTIN		
Registered Office Address:	13851 SW 38 ST MIAMI FL 33175		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office addre	<u>ess</u> :	
NEW Registered Agent:	NICOLE MARTIN		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8880 SW 113 AVE		
MUSI DE FLORIDA STREET ADDRESS)	MIAMI	,FL <u>33176</u>	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability company	florida street address of the r	registered office	
Home of the second	_	基金 20	
Signature of a member or authorized representative of a member			
Printed or typed name of signee			
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my participated by the companies of the prand I am familiar with and accept the obligations of my participated by the companies of the compa	igree to act in this capacity. oper and complete performa sition as registered agent as rely reflect a change in the y has been notified in writin	I further agree to sance, of my duties, sprovided for in registered office of this change.	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00