## L05000)80025

	(Re	equestor's Name)	)
	(Ad	dress)	
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	(Cit	ty/State/Zip/Phon	ne #)
PIC	K-UP	☐ WAIT	MAIL
<u> </u>	(Bu	siness Entity Na	me)
	(Do	cument Number	)
Certified Copies		_ Certificate	s of Status

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L. SELLERS

JUN - 9 2009

**EXAMINER** 

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SECNETANY OF STATE ALLAHASSEE FLORIDA

## **COVER LETTER**

<b>TO:</b> Registration Section Division of Corporations	
SUBJECT:	North Shore Investments, LLC
	Name of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/R	Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence	concerning this matter to the following:
lvan F Alv	varez
Name of Perso	on .
CdA Group Firm/Company	y LLC
270 North Sho	pre Drive
Miami Beach, City/State and Zip	FL 33141
E-mail address: (to be used for future	annual report notification)
For further information concerning	ng this matter, please call:
Ivan F. Alvarez Name of Person	at ( 305 ) 428-2857  Area Code & Daytime Telephone Number
STREET/COURIER ADD Registration Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, Florida 32301	DRESS:  MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327
Enclosed is a check for t	the following amount:
\$25 Filing Fee	\$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.

Name of the limited liability company:	North Shore Investments, LLC
2. (a) Principal office address of limited liability con	mpany: 270 North Shore Drive
(Note: MUST BE STREET ADDRESS)	Miami Beach, FL 33141
(b) Mailing address of limited liability company:	270 North Shore Drive
(Note: MAY BE POST OFFICE BOX)	Miami Beach, FL 33141
8/12/05 3. Date of filing/registration in Florida	<u>L05000080025</u> 4. Document number
5. (a) Registered Agent and Registered Office show	
Registered Agent:	MELAND, RUSSIN, HELLINGER & BUD
Registered Office Address:	3000 WACHOVIA FINANCIAL CENTER 200 S. BISCAYNE BLVD. MIAMI FL 33131 US
(b) Enter name of <b>NEW Registered Agent</b> and/o	or NEW Registered Office address:
NEW Registered Agent:	CdA Group LLC
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS	270 North Shore Drive  Miami Beach ,FL33141
If the limited liability company is not organized under confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the character of the members of the limited liability company or as or the operating agreement of the limited liability considered agent of the limited or typed name of signee  I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address; I hereby confirm that the limited liability considered of Registered Agent	the Florida street address of the registered office e identical. Or, in the case of a Florida limited inge(s) was/were authorized by an affirmative vote otherwise provided in the articles of organization in the articles organization in the articles organization in the articles of organization in the articles organization
Division of Corporations, P.O. H	tov 6327 Tollahassaa FI 32314

FILING FEE: \$25.00