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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: GSCK INVESTMENT (Name of	LLC Limited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
ELKE ROLFF, Esq.		
(Name of Person)		
GLOBAL EXPANSION GROUP	TE 2610	
100 SE SECOND STREET, SUI	TE 2610	
(Address)	To.	
MIAMI, FL 33131	RIDA RIDA	
(City/State and Zip Code)		
For further information concerning this ma	tter, please call:	
ELKE ROLFF, Esq.	at (786) 235-5000	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the follow	ing amount:	
\$25 Filing Fee	S55 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: GSCK I	NVESTMENT LLC	
2. The mailing address of the limited liability company is	i:	
275 NORTH SWINTON AVENUE, DELRAY BEACH	, FL 33444	
SEPTEMBER 14, 2005	L05000090562	
3. Date of filing/registration in Florida	4. Document number	
5. The name of the registered agent and the registered offi Florida Department of State:	ce address as shown on the records of the	
RICHARD E. FONTE		
275 NORTH SWINTON A Address		
DELRAY BEACH, FL 33444 City, State and Zip		
DELRAY BEACH, FL 33444 City, State and Zip 6. The name and address of the new registered agent and/or office:		
GUENTHER MOECKESCH		
Name 275 NORTH SWINTON AV	<u></u>	
Florida street address (P.O. Bo	3444	
City, State and 2	Lip	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the fand 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 other or the operating agreement of the limited liability company	laws of the State of Florida, it is hereby florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote erwise provided in the articles of organization y.	
Elegan		
(Signature of a member or authorized representative of a member)		
ELKE ROLFF, Esq. (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 pochapter old. A.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	igree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in trely reflect a change in the registered office y has been notified in writing of this change.	

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

(Signature of Registered A)