106000001753

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02/16/06--MM17--MM **25,00

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M. HODGE

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.

ag	geni, or boin, in the state (oj rioriaa.			•			
1.	. The name of the limited	liability comp	any is:	H Renov	ations	LL	<u>.</u> C	
2.	. The mailing address of t	he limited liab	ility company is:	3617	N.W	4+1		
	TERRACE 1	MIAMI	Florida	33125				,
	1-06-200			1000	00001		· >	
<u> </u>	. Date of filing/registration			4. Document r		<u> </u>	<u></u>	
5.	. The name of the registere Florida Department of St	Top	ge Menc	lozA		rds o	f the	
_	-		Address Fl 33 City, State and Z		€ ALLAMAS	d Show Pa	06 FEB	<u></u>
6.	. The name and address of	the new regist	tered agent and/or	office:	2000	1 **	<u>6</u>	
	<u>N</u>	IRAI Services, I				ر تاری	PM 1: 38	
	Name 2731 Executive Park Drive, Suite 4							
	Florida street address (P.O. Box NOT acceptable)							
	V	Veston	FL 33331					
		<u></u>	City, State and Zip					
ar lia th th	on the limited liability componfirmed that after the chand the business office of the limited members of the limited me operating agreement of the limited of a member or authorized.	inge or change: ne registered ap by confirmed to liability composite limited lial Local descriptions Loc	s are made, the Flo gent will be identic hat the change(s) v any or as otherwise bility company.	rida street addre	ss of the region	stered	i Affi.	ce ote of or
	YANIRA (nendaz	7 A					
•	Printed or typed name of signee)							
14	hereby accept the appoint omply with the provisions and I am familiar with and hapter 608, F.S. Or, if this daress, I hereby confirm the IRAL Sordies, lag. Signature of Registered Agent)	tment as regist of all statutes accept the obliss document is hat the limited	tered agent and agi relative to the prop igations of my posi being filed to mere liability company	ree to act in this per and complete tion as registere ly reflect a char has been notified	capacity. I fix performance d agent as pr ige in the reg I in writing o	urther e of m ovide istere f this	r agr ny du ed for ed off chan	ee to ties, in ice ge.
ν,	D COPIDIGION LIBORE)							

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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