## 116000040754

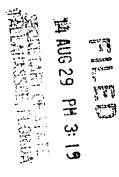
(Requestor's Name)	
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ertified Copies Certificates of Status	_
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C. CARROTHERS

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	1. Name of the limited liability company: LITTLE HAVANA - 862 SW 6 ST, LLC									
	(a)									
	(**)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)							
		688 BREWERS BRIDGE ROAD, #2	688 BREWERS BRIDGE ROAD, #2  JACKSON, NJ 08527							
		JACKSON, NJ 08527								
		04/19/2006		L06000040754						
3.		Date of filing/registration in Florida	4.		Document nun	nber				
5.	(a)									
٦.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:								
		CORPDIRECT AGENTS, INC.			-			• .		
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				<b>新</b>	es 14th	3		
		1200 SOUTH PINE ISLAND ROAD			_	图 图 图				
		PLANTATION .FL	33324	4		25 28	F-230			
		, · · · · · · · · · · · · · · · · · · ·			•	7				
	(b)		_	င်း ယ္	'नेद <b>वर्ग</b>					
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office ad	<u>ldress</u> :						
		SG REGISTERED AGENT LLC								
		NEW Registered Office Address:			-					
		700 S. FEDERAL HIGHWAY, SUITE 200								
		BOCA RATON , FL	3343	2						
the ag	e cha ent v as/w	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law o	the regi bility c f the lin	istered office ompany, it is nited liability	e and the busing s hereby confir y company or a npany.	ess office of med that the is otherwise p	the regis change(	stered s)		
Signature of a member or authorized representative of a member			ELI BLEEMAN  Printed or typed name of signee							
I pr	here ovisi e obi mer otifie	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address, I have the properties of this change.	ee to ac perform I for in iereby c	t in this cape ance of my c Chapter 605 confirm that	acity I further	agree to con	nply wit th and a is being y has be	h the sccept filed en		
Si	gnatu	re of Registered Agent								