

05/09/2011	13:25	3052207575	SERGIO PAGLIERY PA H/1000/534463
			F REGISTERED OFFICE OR REGISTERED AGENT OR ITY 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.

LA PICCOLA BANCA L.L.C. 1. Name of the limited liability company: 21200 POINT PLACE 2. (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)

5/31/06

3. Date of filing/registration in Florida

Document number

OWEN S. FREED

2200 MUSEUM TOWER 150 WEST FLAGER STREE

Company Management Set

8788 S.W. 8th Stree

Miami

AVENTURA, FLORIDA 33180

AVENTURA, FLORIDA 33180

21200 POINT PLACE

L06000056087

APT\_1405

APT, 1405

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Registered Office Address:

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	1.4				
	•			In.	1
b) Enter name of <b>NEW Registered Agent</b> and	Vor NE	W Registered	Office addre	cc 1>	Z
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NEW Registered Agent:

NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited in the business of the registered agent will be identical. liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Sergio A. Pagliery

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. Autil Lellor

Signature of Registered Agent MGR. OF COMPANY MANAGEMENT, LLC

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

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