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PICK-UP	WAIT	MAIL
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(Document Number)		
Certified Copies	Certificates	of Status <u>* / </u>
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

1.8. Hr. 8. Hr.

T. CLINE
JUN 3 0 2009
EXAMINER



June 22, 2009

MANUEL VADILLO 11420 NW 41ST STREET, SUITE 202 MIAMI, FL 33178

SUBJECT: DORAL STERLING HOLDING LLC

Ref. Number: L06000060338

We have received your document for DORAL STERLING HOLDING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please ঝেনি(850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 209A00021101

COVER LETTER

Registration Section
Division of Corporations

TO:

	erling Holding LLC ed 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 this	matter to the following:			
Manuel Vadillo		2		
Name of Person	NECH SECH	ر 100		
Torres and Vadillo LLP		2009 JUN 29 A		
11402 NW 41st Street suite 202 Address	FLORIDA	8+ 18: HB		
Miami, FL 33178 City/State and Zip Code				
mjvadillo@torresvadillollp.com E-mail address: (to be used for future annual report notifica	tion)			
For further information concerning this matter, please call:				
Julio Arriaga at (305) 798 3966			
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 following an	iount:			
\$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.

1. Name of the limited liability company:	Doral Sterling Holding LLC	
2. (a) Principal office address of limited liability com	pany: 62 Indian Trace	
(Note: MUST BE STREET ADDRESS)	suite 154 Weston, FL 33326	
(b) Mailing address of limited liability company:		
(Note: MAY BE POST OFFICE BOX)		
06/13/06	L06000060338	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shows	on the records of the Florida Bent, of State:	
Registered Agent:	Eugene Howard	
Registered Office Address:	1111 Lincoln Road #500 A N Miami Beach, FL 3331364	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	ES & C	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	11402 NW 41st Street suite 202 Miami, FL 33178	
If the limited liability company is not organized under confirmed that after the change or changes are made, t and the business office of the registered agent will be liability company, it is hereby confirmed that the chan of the members of the limited liability company or as or the operating agreement of the limited liability com	the laws of the State of Florida, it is hereby he Florida street address of the registered office identical. Or, in the case of a Florida limited	
Printed or typed name of signee I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of machine to the chapter 608, F.S. On, if this document is being filed to address. I hereby confirm that the limited liability compositions of Registered Agent.	ind agree to act in this capacity. I further agree to e proper and complete performance of my duties, by position as registered agent as provided for in o merely reflect a change in the registered office apany has been notified in writing of this change.	

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