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## 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:	45 WEST 9TH STREET, LLC		
2. (a) Principal office address of limited liability com	pany:		
(Note: MUST BE STREET ADDRESS)	2710 SW 22 AVENUE MIAMI, FL 33133		
(b) Mailing address of limited liability company:			
(Note: MAY BE POST OFFICE BOX)			
11/06/2006	L0600010735		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dept. of State:		
Registered Agent:	DARLYN T. BLAISE		
Registered Office Address:	1540 DEWEY STREET HOLLYWOOD, FL 33020		
	<del></del>		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address?			
NEW Registered Agent:	AMPARO TERRERO		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2710 SW 22 AVENUE		
MICEL DE L'HOMIDITETATION	MIAMI ,FL_33133		
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 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.  Notation 11. 27-10  Signature of a member or authorized representative of a member			
	0 4		
Darlyn T. Blaise 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 m Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability com	and agree to act in this capacity. I further agree to be proper and complete performance of my duties, by position as registered agent as provided for in the many reflect a change in the registered office by any has been notified in writing of this change.		
Signature of Registered Agent			

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