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PICK-UP WAIT MAIL		
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SECRULARY OF STATE

## COVER LETTER

Division of Corporations	
SUBJECT: DAHETA INVESTMEN	TS LLC
	of Limited 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	g this matter to the following:
•••	
ELI PANELL, CPA, ESQ.	· · · · · · · · · · · · · · · · · · ·
(Name of Person)	
CARMENATES PANELL, P.A.	
(Firm/Company)	
•	
8410 NW 53RD TERRACE, SUITE 100	
(Address)	
DORAL, FL 33166	
(City/State and Zip Code)	
For further information concerning this mat	ter, please call:
,	
ELI PANELL, CPA, ESQ.	at ( 305 ) 513-8606
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following	ng amount:
☑ \$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: DAHETA IN	VESTMENTS LLC
2. (a) Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )	7: 3370 HIDDEN BAY DRIVE, #114 MIAMI, FL 33180
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	3370 HIDDEN BAY DRIVE, #114 MIAMI, FL 33180
04/12/2007	L07000039571
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:	CARMENATES PANELL, P.A.
Registered Office Address:	8410 NW 53RD TERRACE, SUITE 100 DORAL, FL 33166
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	W Registered Office address:
NEW Registered Agent:	MENUJIN SHADAH
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3370 HIDDEN BAY DRIVE, #114
·	MIAMI ,FL 33180
If the limited liability company is not organized under the limited that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the cahereby confirmed that the change(s) was/were authorized be liability company or as otherwise provided in the articles of limited liability company.	t address of the registered office and the business ase of a Florida limited liability company, it is an affirmative vote of the members of the limited forganization or the operating agreement of the
(Signature of a member or authorized representative of a member)  MENUJIN SHADAH	SSEE FI
(Printed or typed name of signee)	- CORP. 5
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the proam familiar with and accept the obligations of my position F.S. Or, if this apcument is being filed to merely reflect a confirm that freflimited liability company has been notified	gree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.
(Signature of Registered Agent)	

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