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SECONDIVERS OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT:	Ocean 4660, LLC
Name of L	imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered O	ffice Change and fee(s) are submitted for filing.
Please return all correspondence concerning to	this matter to the following:
Remo Polselli	
Name of Person	
Firm/Company	
7557 W. Sand Lake Road, #1	56
Orlando, FL 32819-510 City/State and Zip Code	
krystol_rappuhn@yahoo.cor E-mail address: (to be used for future annual report no	n otification)
For further information concerning this matter	er, please call:
Anna Sigurdson	at (248)645-5400
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301 Enclosed is a check for the followin	g 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:	Ocean 4660, LLC
2. (a) Principal office address of limited liability company	55 E. Long Lake, #204
(Note: MUST BE STREET ADDRESS)	Troy, Michigan 48085
(b) Mailing address of limited liability company:	55 E. Long Lake, #204 B F
(Note: MAY BE POST OFFICE BOX)	Troy, Michigan 48085
10/15/07	L0700010443621
3. Date of filing/registration in Florida5. (a) Registered Agent and Registered Office shown on the contraction of the contractio	
Registered Agent:	Lloyd Falk
Registered Office Address:	600 SW 4TH AVENUE FORT LAUDERDALE FL 33315 US
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> <u>NEW</u> Registered Agent:	W Registered Office address: Remo Polselli
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	7557 W. Sand Lake #156 Orlando ,FL32819-510
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of I member or authorized representative of a member Hanna Karcho Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the province of the obligations of my possible to the product of the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of the obligations of my possible to the provisions of the provisions of the provisions of the provisions of the obligations of the provisions of the pr	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization.

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