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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 : (305) 634-3694 Phone

: (305)633-9696 Fax Number

REGISTERED AGENT CHANGE

LENMART INVESTMENTS, L.L.C.

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EMPIRE CORP KIT

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(a)

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. The name of the limit	lted liability company i	is: LENMART IN	VESTMENTS, LLC		
2. The mailing address	of the limited liability	company is : 121	190 N.W. 98 Avenue	e, Bay #6,	
	ns, Florida 33016	-	-		
			100000111100		
11/13/07 3. Date of filing/registration in Florida		- -	L07000114469		
3. Date of himg/registr	anou in Lioues	4.	Document number		
5. The name of the registration of the registr		gistered office add	iress as shown on the	records of the	
	Sergio Sanch	es			
		Name			
	12190 N.W. 98		<u> 6</u>		
	Lileiusk Canda	Address	40		
	Hlaleah Garder	ns, Florida 330 by. State and Zip	16		
C 770 - 11-11-11-11-11-11-11-11-11-11-11-11-1		••••		7A.S.	
6. The name and address	s of the new registered	agent and/or on:	Çe:		
Jesus F. Bujan		n_ ·		ART TO	
•		Name		2007 NOV 15 SECRETAR)	
	782 N.W. 42 A			<u> </u>	
	Florida street addr	ess (P.O. Box NO	rr acceptable)	四年 至	
	Mlami,	FL 33126		ST&	
		, State and Zip	<u> </u>		
If the limited liability or confirmed that after the and the business office liability company, it is l of the members of the l or the operating agreem	change or changes are of the registered agent pereby confirmed that t imited liability compa	: made, the Florid: will be identical. the change(s) was ny or as otherwise	a street address of the Or, in the case of a F /were authorized by a	e registered office Florida limited an affirmative vote	
Signature of a momber or suit	iorized representative of a mor	mber)			
Jeru	F.Bria				
Reinted or typed name of rigor					
I hereby accept the am comply with the provist and I am familiar with a Chapter 608, F.S. Or address, I hereby confi	noiniment as registered ons of all statutes relat and accept the obligati if this document is bein m that the limited liab	l agent and agree tive to the proper one of my position ig filed to merely t lity company has	to act in this capacity and complete perform as registered agent reflect a change in the been notified in writi	y. I further agree to nance of my duties, as provided for in e registered office ing of this change.	
(Signature of Registered Agen	1)				
	sion of Corporations,	P.O. Box 6327, T ING FEE: \$25.00		14	
INHS18 (8/05)		1.1	0 7 0000		

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