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Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

JUL 2 2 2010

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
	·	
SUBJECT: 2008 "LLC"		2008 "LLC"
	Name of	Limited Liability Company
Dear S	ir or Madam:	
The en	closed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please	return all correspondence concerning	g this matter to the following:
Harold M. Garber, PA		
	Name of Person	
Harold M. Garber, PA		
	Firm/Company	
	2999 NE 191 Street #903	3
	Address	
	Aventura, FL 33180	
	City/State and Zip Code	
E-1	mail address: (to be used for future annual report	notification)
	ther information concerning this mat	
rot tui	the information concerning this man	iter, piease carr.
	Harold M. Garber, PA	at (305) 937-4045
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations Clifton Building		Division of Corporations P.O. Box 6327
<u> </u>		Tallahassee, Florida 32314
	Tallahassee, Florida 32301	rananasse, riorda ses ri
	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.

2008 "LLC"
17060 West Dixie Highway
North Miami Beach, FL_33160
17060 West Dixie Highway
North Miami Beach, FL 33160
L0800005918
4. Document number
the records of the Florida Dept. of State:
Hermann Seidl
17060 West Dixie Highway North Miami Beach, FL 33160
W Registered Office address: Jean V. Emile
17060 West Dixie Highway
North Miami Beach ,FL33160
laws of the State of Florida, it is hereby 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.
♣ RP OF S:
gree to act in this capacity. I furthe agree to performance of my dutes, sition as registered agent as provided for morely reflect a change in the registered office y has been notified in writing of this change.

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