

L08000063938

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

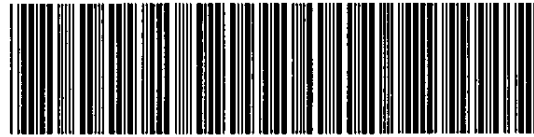
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300134583663

09/03/08--01003--015 **35.00

RECEIVED
08 SEP -3 AM 10:48
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. KOHR
SEP 3 2008
EXAMINER

FILED
08 SEP -3 PM 1:35
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

FILED
08 SEP - 3 PM 1:35
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. ATTARDI DEVELOPMENT, LLC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

Walk in

Pick up time

2:00

Certified Copy

Mail out

Will wait

Photocopy

2 Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

28

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: Attardi Development, LLC

2. (A) Principal office address of limited liability company: 4747 Collins Avenue #205
(Note: MUST BE STREET ADDRESS) Miami Beach, FL 33140

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

7/01/08
3. Date of filing/registration in Florida

L08000063938
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Agent: Haim Einhorn
Registered Office Address: 4747 Collins Avenue #205
Miami Beach, FL 33140

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Agent: Ziv Paz
NEW Registered Office Address: 4747 Collins Avenue #205
(MUST BE FLORIDA STREET ADDRESS) Miami Beach, FL 33140
FL

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.

Ziv Paz
(Signature of a member or authorized representative of a member)

Ziv Paz
(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Ziv Paz
(Signature of Registered Agent)

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

FILED
08 SEP -3 PM 1:35
TALLAHASSEE, FLORIDA