## L0900000 3524

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08/23/10--01011--006 \*\*25.00



S. HAWKES

AUG 2 5 2010

EXAMINER

## \*\*\* 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.

ageni, or boin, in the state of Fibrial.	
1. Name of the limited liability company:	•
2. (a) Principal office address of limited liability company:	60 E. 42 no St.
(Note: MUST BE STREET ADDRESS)	St. 1834
	NY, NY 10165
(b) Mailing address of limited liability company:	Same_
(Note: MAY BE POST OFFICE BOX)	
$\frac{OI/I > 12009}{3. \text{ Date of filing/registration in Florida}}$	109000003524
3. Date of filing/registration in Florida 4	Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept of State
Registered Agent:	- SS - I
Registered Office Address:	
	2 1
(b) Enter name of NEW Registered Agent and/or NEW	Registered Office address:
NEW Registered Agent:	John TomLinson
NEW Registered Office Address:	1940 NE 135-th ST.
(MUST BE FLORIDA STREET ADDRESS)	
	North MIAMI ,FL 33181-2127
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identic liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	was of the State of Florida, it is hereby orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of organization
Printed or typed name of signee	
*	man to get in this connection. I fauther access to
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the proj and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to mero address, I hereby confirm that the limited liability company	ree to get in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.

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

Signature of Registered Agent