L090000000898

(Requestor's Nome)	
B. ENTUA	
- 1609 Tigertail Aue -	
Minni, FC 33133	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

HOFEB 19 PHI2: 01 Becretary of State FILED

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 limited liability company is:	Regional Confer of South Florida LLC npany is: 701 Brickell Avenue,
2. The mailing address of the limited liability cor	npany is: 701 Brickell Avenue, .
Soite 1550 Mini El	33/3/
Suite 1550, Minui, FL MArch 3, 2009 3. Date of filing/registration in Florida	L09000020898
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the regist Florida Department of State:	ered office address as shown on the records of the
CORPORATE Crea	Mans Wetwork Inc.
11380 Prosperit PALM BEACH (City, S	LOGODODOBOS 4. Document number ered office address as shown on the records of the ATIONS WHOWAR INC. Name Y FAYONS POAD, #2216 Address SMADENS, FL 33410 STEER TARY OF STATE AND STATE AND SEE, FLORIDA OF SOUTH Florida LLC Jame Avenue, Suite 1200 (P.O. Box NOT acceptable)
6. The name and address of the new registered ag	ent and/or office:
BRIAN M. GARCI	A South Florida II (MS 7 III
(ægiona) Center	Vame
1221 Brickell	Avenue, Suite 1200 RATE
Florida street address	(P.O. Box NOT acceptable)
Miami	FL 33/3/ ate and Zip
City, St	ate and Zip
liability company, it is hereby confirmed that the the members of the limited liability company or a the operating agreement of the limited liability company confirmed liability company or a the operating agreement of the limited liability confirmed liability confir	
(Signature of a member of authorized representative of a member)
BRIAN M. GARCLA (Printed or typed name of signce)	
I hereby accept the appointment as registered ag comply with the provisions of all statutes relative and I am familiar with and accept the obligations Chapter 608, F.S. Or, if this document is being find the limited liability and the limited liability (Signature of Registered Reent)	ent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, of my position as registered agent as provided for in led to merely reflect a change in the registered office of company has been notified in writing of this change.
	Roy 6327 Tallahassee FT 32314

FILING FEE: \$25.00