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SECRETARY OF STATE
DIVISION OF CORPORATIONS

JUN - 7 2013

T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: LEM USA TIME Name of Limited	STMENT LCC Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Sauda Valenziela Name of Person			
PEN USA Investment UC Firm/Company			
1260 Hayesty Terrace			
City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Sandra Valenziely at (954) 990-3462			
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:			
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		



May 29, 2013

SANDRA VALENZUELA 1260 MAJESTY TERRACE WESTON, FL 33327

SUBJECT: REM USA INVESTMENT LLC

Ref. Number: L09000065906

We have received your document for REM USA INVESTMENT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton Regulatory Specialist II Registration/Qualification Section

Letter Number: 413A00013495

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:	ISA INVESTHENT LLC
2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y: 22w North Commerce Pkuay weston, Fi 33326
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2200 North Connex Peway Weston, FI 33326
3. Date of filing/registration in Florida	<u>L0900065906</u> 4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	American Capital Assets Ligragement Gr
Registered Office Address:	2200 N. Commerce Pency Suite 110 Weston, FL 33726
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	Sandra Valenzuda
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1260 Majesty Terraco Weston FL 33327
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwithe operating agreement of the limited liability company.	lorida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of
Signature of a member or authorized representative of a member	N-6
Printed or typed name of agnee	To and in this consoits. I found Town
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compandations of the confirmation of the compandation of the confirmation of	gree to act in this capacity. I further agree to oper and complete performance of my duffes, sition as registered agent as providing for in the registered office y has been notified in writing of this change.
Clanding Charles	

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

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