## L09000010259

CEROW AND COMPANY, C.P.A.s, P.A CERTIFIED PUBLIC ACCOUNTANTS 1801 SARNO ROAD, SUITE 3 MELBOURNE, FLORIDA 32935  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:			
CERTIFIED PUBLIC ACCOUNTANTS 1801 SARNO ROAD, SUITE 3 MELBOURNE, FLORIDA 32935  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Requestor's Name)		
CERTIFIED PUBLIC ACCOUNTANTS 1801 SARNO ROAD, SUITE 3 MELBOURNE, FLORIDA 32935  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status			
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Office Use Only

## 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.

Name of the limited liability company:	Terra Firma Laminin LLC	
2. (a) Principal office address of limited liability company	630 Newport Dr.	
(Note: MUST BE STREET ADDRESS)	Indialantic, FL 32903	
(b) Mailing address of limited liability company:	630 Newport Dr. 53	
(Note: MAY BE POST OFFICE BOX)	Indialantic, FL 32903	
7/22/2009	L090000702	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	United States Corporation Agents, Inc.	
Registered Office Address:	13302 Winding Oaks Blvd. A-100	
	Tampa, FL 33612	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
NEW Registered Agent:	Michael S. Cerow, C.P.A.	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1801 Sarno Road Suite 3	
	Melbourne ,FL32935	
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.		
Signature if a member or authorized representative of a member		
Jose W Ruiz Printed or typed name of signee	_	
I hereby accept the appointment as registered agent and a comply with the provisions of all statules relative to the product and I am familiar with and accept the obligations of my po. Chapter 608, F.S. Or, if this document is being filed to met address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in rely 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