## 09000079129

| (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: |  |  |  |  |  |
|   |  |  |  |  |  |
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Office Use Only



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SEUKETARY OF STAFE

T. HAMPTON

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## **COVER LETTER**

| TO:    | Registration Section Division of Corporations   |                                  |   |               |  |
|--------|---|----------------------------------|---|---------------|--|
|        |   |                                  | VESTMENT US LLC nited Liability Company   |               |  |
|        | IN  | ame of Limite                    | т паотну Сопрану  |               |  |
| Dear   | Sir or Madam:   |                                  |   |               |  |
| The e  | nclosed Registered Agent/Regi   | istered Office (                 | Change and fee(s) are submitted   | l for filing. |  |
| Pleas  | e return all correspondence con   | cerning this m                   | atter to the following:   |               |  |
|        | JUAN CARLOS Z   | URITA                            |   |               |  |
|        | Name of Person  |                                  |   |               |  |
|        | CSG INVESTMENT  | US LLC                           |   |               |  |
|        | Firm/Company  |                                  |   |               |  |
|        | 2800 Weston Rd, So  | uite 202                         | <u>.</u>  |               |  |
|        | Weston Rd, Suite 202, Weston Rd, Suite 202, Weston Rd, State and Zip Cod  |                                  | 31  |               |  |
| E      | jczurita@acfgroupt  | JS.COM<br>al report notification | on)   |               |  |
| For fu | urther information concerning the   | his matter, plea                 | ase call:   |               |  |
|        | Juan Carlos Zurita  | at (                             | 954 ) 385-171   |               |  |
|        | Name of Person  |                                  | Area Code & Daytime Telephon  | e Number      |  |
|        | STREET/COURIER ADDRE Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 | SS:                              | MAILING ADDRESS:<br>Registration Section<br>Division of Corporations<br>P.O. Box 6327<br>Tallahassee, Florida 32314 |               |  |
|        | Enclosed is a check for the   | following amo                    | ount:   |               |  |
|        | \$25 Filing Fee   |                                  | \$55 Filing Fee & Certified   | Сору          |  |

TO:

## 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:  | CSG INVESTMENT US, LLC   |  |  |  |
|--|--|--|--|--|
| 2. (a) Principal office address of limited liability com   | pany: 2800 Weston Rd. Suite 202  |  |  |  |
| (Note: MUST BE STREET ADDRESS)   | Weston, Fl, 33331  |  |  |  |
| (b) Mailing address of limited liability company:  | 2800 Weston Rd. Suite 202  |  |  |  |
| (Note: MAY BE POST OFFICE BOX)   | Weston, FI, 33331  |  |  |  |
| 08/17/2009   | L09000079129   |  |  |  |
| 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:  | American Capital Assets Management   |  |  |  |
| Registered Office Address:   | 2800 Weston Rd, Suite 202<br>Weston, Fl, 33331   |  |  |  |
| <ul> <li>(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:</li> <li><u>NEW</u> Registered Office Address:</li> </ul>   | 2806 Weston Rd.  |  |  |  |
| (MUST BE FLORIDA STREET ADDRESS)   | Suite B  |  |  |  |
|  | Weston ,FL <u>33331</u>  |  |  |  |
| If the limited liability company is not organized under confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change of the members of the limited liability company or as confirmed that the change of the operating agreement of the limited liability company or as confirmed that the change of the operating agreement of the limited liability company or as confirmed or typed name of signee.  I hereby accept the appointment as registered agent as | he Florida street address of the registered office identical. Or, in the case of a Florida limited ge(s) was/were authorized by an affirmative vote otherwise provided in the articles of organization pany. |  |  |  |
| I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of m Chapter 608, F.S. Or, if this document is being filed to address. I hereby confirm that the limited liability com  | e proper and complete performance of my duties, y position as registered agent as provided for in o merely reflect a change in the egistered office many has been notified in writing of this change.        |  |  |  |

Signature of Registered Agent