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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: SUBJECT: SUBJECT: Name of Limited 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:			
Educardo J-Guevara Name of Person			
GUESAUSALLC Firm/Company			
12276 San Jose Blud #527			
Jacksonville FL 32223 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Fduardo Guevara at (904) 610-5171 Name of Person Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section			
Division of Corporations Division of Corporations			
Clifton Building P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301			
Enclosed is a check for the following amount:			
\$25 Filing Fee & Certified Copy			

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.

g,	
1. Name of the limited liability company:	sa usallc
2. (a) Principal office address of limited liability compan	y: Guesa USALLC
(Note: MUST BE STREET ADDRESS)	JECKSONVIlle, FL 3 2223
(b) Mailing address of limited liability company:	Guesa USALLC
(Note: MAY BE POST OFFICE BOX)	12276 San Jose Ald. #527 Tacksonville, FL 32223
12/21/2009	L09000120646
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:	Samuel Le Prell
Registered Office Address:	Jacksonville FL 3720
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	Eduardo J-Guerra
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Jacksonville \$1223
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 iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company of as othe or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	lorida street address of the repostered office-
Frinted or typed name of signee	_
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 different Is being filed to me address, I hereby confirm that the funited liability company	agree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in erely reflect a change in the registered office y 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