Division of Corparations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Fax Number

: (307)200-2803 : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address	

LLC REGISTERED AGE EAST WEST INVEST. LLC

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Estimated Charge	\$25.00

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Helpy LEGGET

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	ame of the limited liability company: EAST	WEST INVEST, LLC			
2. (a)	3030 N. Rocky Point Dr.	(b) 3030 N. Rocky Point Dr.			
. ,	Principal office address of finited liability company (Note: MUST BE STREET ADDRESS)		ted liability company:		
	STE 150A	STE 150A			
	Tampa, FL 33607	Tampa, FL 33607			
	02/16/2010	L10000017776			
3.	Date of filing/registration in Florida	4. Document number			
5. (a)	WEIGHTMAN, DAVID E				
	Registered Agent and Registered Office shown on the record 2851 VIA PIAZZA LOOP	rds of the Florida Dept. of State:			
	Registered Office Address (MUST BE FLORIDA STRE				
	FORT MYERS		7 7 8		
(b)	Registered Agents Inc.		第 第		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	stered Office address:	能力と関		
	3030 N. Rocky Point Dr.	Notes i	TO BE U		
	NEW Registered Office Address		9 9		
	STE 150A		2		
	Tampa	. FL 33607			
the cha agent v was/wo the arti	nmited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the membicles of organization or the operating agreement of the interest of a member or authorized representative of a member	ne laws of the State of Florida, it is hereby costs of the registered office and the business of diability company, it is hereby confirmed beers of the limited hability company or as of the limited liability company. Riley Park Printed or typed name	office of the registered that the change(s) herwise provided in		
порус	hy accept the appointment as registered agent analisms of all statutes relative to the proper and complications of my position as registered agent as profess reflect a change in the registered office address dimagniting of this change. Bill Havre - Assis	d agree to act is this capacity. I further agr pleie performance of my duties, and I am fur wided for in Chapter 605, F.S. Or, if this do ss, I hereby confirm that the limited liability stant Secretary	ree to comply with the miliar with and accept scument is being filed company has been		
Signature of Registered Agent					