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J. BRYAN

JUL 12 2011

EXAMINER

COVER LETTER

Division of Corpo	rations					
SUBJECT:	so	URCE	CON	TRAC	T LLC	
		f Limite				
Dear Sir or Madam:						
The enclosed Registered	Agent/Registered	d Office	Change	and fe	e(s) are submitte	d for filing.
Please return all correspo	ndence concerni	ng this n	natter to	the fol	llowing:	
GO	LAN RABIN					
	ne of Person					
0011005	CONTRACTI					11 JUL 11 PH 3: 24 SECRETARY OF STATE FALLAHASSEE, FLORIDA
	CONTRACT LI n/Company	<u>LC</u>	· · ·	_		A FEET IN THE PER PER PER PER PER PER PER PER PER PE
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3/35 (NW 112TH ST					Fig. 2
	ddress			_		To Sign
						REID REID
MIA	MI FL 33180					- Options
	te and Zip Code			_		
golan@so E-mail address: (to be used	urcecontract.co	om				
E-mail address: (to be used	for future annual repor	rt notificati	on)	_		
For further information co	oncerning this ma	atter, ple	ase call	:		
GOLAN R	ABIN	at (_	305	_)	630-8950 ex	ct 2508
Name of Perso	on			Area Cod	le & Daytime Telephor	ne Number
STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, Florida	tions ter Circle		Reg Divi P.O	istration ision of . Box 6.	ADDRESS: n Section Corporations 327 e, Florida 32314	
Enclosed is a chee	ck for the follow	ing amo	ount:			
\$25 Filing Fee			5 \$5	5 Filing	g Fee & Certified	Сору

TO: Registration Section

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:	SOURCE CONTRACT LLC				
2. (a) Principal office address of limited liability compa	any: 3435 NW 112TH ST				
(Note: MUST BE STREET ADDRESS)	MIAMI FL 33180				
(b) Mailing address of limited liability company:	SAME				
(Note: MAY BE POST OFFICE BOX)					
SEPT 16 2010	L10000097155				
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:	INCORPORATORS USA LLC				
Registered Office Address:	1220 NORTH MARKET ST WILMINGTON DE 19801				
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u> <u>NEW</u> Registered Agent:	EW Registered Office address: GOLAN RABIN				
NEW Registered Office Address:	3435 NW 112TH ST				
(MŪST BE FLORIDA STREET ADDRESS)	MIAMI FL 33180 ,FL 33180				
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 of a member or authorized representative of a member					
GOLAN RABIN					
Printed or typed name of signee					
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my chapter 608, F.S. Or, if this document is being filed to hadress, I hereby confirmation the limited liability company.	l agree to act in this capacity. I further agree to proper and complete performance of my auties, position as registered agent as provided for in merely reflect a change in the registered office my has been notified in writing of this change.				
Signature of Registered Agent					