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SECRETARY OF STATE

FILE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: R.U.J.E. ENTERPRISES L.L.C. (Name of Limited	Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Alcides I. Avila	
(Name of Person)	08 T ASE
Avila Rodriguez Hernandez Mena & Ferri L	D8 MAY 19 FT SECRETARY OF TALLAHASSEE.
2525 Ponce de Leon Blvd., Suite 1225	FLOST FLOST
(Address)	
CORAL GABLES, FL 33134 (City/State and Zip Code)	
For further information concerning this matter, plea	ase call:
Angel Machado at (3	305 ₎ 779-3560
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amo	ount:
✓ \$25 Filing Fee	\$55 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 of liability company submits the following statement agent, or both, in the State of Florida.	r 608.508, Florida Statutes, the undersigned limited in order to change its registered office or registered
1. The name of the limited liability company is:	R.U.J.E. ENTERPRISES L.L.C.
2. The mailing address of the limited liability comp	pany is : 2525 Ponce de Leon Blvd., Suite 1225
· · · · · · · · · · · · · · · · · · ·	Coral Gables, FL 33134
02/18/1997	L97000000199
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the register Florida Department of State:	
CORPORATE CREAT	TIONS NETWORK INC.
-	ame PSG 3
11380 PROSPERITY FA	ARMS ROAD #221E ARM T
Address PALM BEACH GARDENS FL 33410	
	ate and Zip
6. The name and address of the new registered agen	IONS NETWORK INC. Iame ARMS ROAD #221E Idress NS FL 33410 ate and Zip at and/or office:
INTERAMERICAN COR	RPORATE SERVICES LLC
Nai 2525 PONCE DE LEON	
Florida street address (P	O.O. Box NOT acceptable)
CORAL GABLES, F	FL 33134
City, State	e and Zip
If the limited liability company is not organized und confirmed that after the change or changes are made and the business office of the registered agent will be liability company, it is hereby confirmed that the choof the members of the limited liability company or or the operating agreement of the limited liability company or the operating agreement of the limited liability of the limited liability company or the operating agreement of the limited liability of the	e, the Florida street address of the registered office be identical. Or, in the case of a Florida limited hange(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization
(Signature of a member or authorized representative of a member)	
Printed or typed name of signee)	· .
Holin	nt and agree to act in this capacity. I further agree to the proper and complete performance of my duties, if my position as registered agent as provided for in divinerely reflect a change in the registered office company has been notified in writing of this change.
(Signature of Registered Agent)	_
Division of Corporations, P.O.	Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00