19900001266

7900 Red South Mis	a Mortgage LLC Road • Penthouse ami, FL 33143		
City/State/	Zip Phone #	Office Use O	only
CORPORATION	NAME(S) & DOCUMENT N	UMBER(S), (if known):	
•	oration Name)	(Document #)	
3(Corp	oration Name)	(Document #)	
4(Corp	oration Name)	(Document #)	<u></u>
Walk in Mail out NEW FILINGS	Pick up time Will wait AMENDMENTS		
Profit NonProfit	Amendment Resignation of R.A., Officer/I	-07/06 *****	9241434 3/9901139012 35.00 *****35.00
Limited Liability Domestication Other	Change of Registered Agent Dissolution/Withdrawal Merger		SEGRETA DIVISION OF
OTHER FILINGS Annual Report Fictitious Name Name Reservation	REGISTRATION/ QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other	Name Availability Document Examiner Updater Updater Verifyer Acknowledgement W. P. Verifyer	FILED TARY OF STATE OF CORPORATIONS -6 PM 2: 29

CR2E031(1/95)

Examiner's Initials

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. The name of the limited liability company is: Tequesta Moctage LLC	
2. The mailing address of the limited liability company is: 1900 Red Road	
Penthouse, South Miami Florida 33143	
March 5, 1999 3. Date of filing/registration in Florida 1990000121010 4. Document number	
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Address	SECRET
6. The name and address of the new registered agent and/or office:	75. 1.3.
Peter C. Myrtetus Name Name Propose Florida street address (P.O. Box NOT acceptable) South Miam FL 33143	OF STATE
City, State and Zip	
If the limited liability company is not organized under the laws of the State of Florida, it is I confirmed that after the change or changes are made, the Florida street address of the registered and the business office of the registered agent will be identical. Or, in the case of a Florida liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative value a majority of the members of the limited liability company or as otherwise provided in the articological company. (Signature of member of authorized representative of a member)	office imited

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited tigbility company has been notified in writing of this change.

(Signature of Registered Agent)

(Printed or typed name of signee)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(9/97)

FILING FEE: \$35.00