

3. 2008, 4:03PM

Koeppel Law Group

No. 1340

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Florida Department of State
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REGISTERED AGENT CHANGE

LAS OLAS ASSETS, L.L.C.

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EXAMINER

**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. Name of the limited liability company: LAS OLAS ASSETS, L.L.C.
2. (a) Principal office address of limited liability company: 17401 Bridle Way Trail
(Note: **MUST BE STREET ADDRESS**) Boca Raton, FL 33498
- (b) Mailing address of limited liability company: P.O. Box 370668
(Note: **MAY BE POST OFFICE BOX**) Miami, FL 33137

- July 27, 1999
3. Date of filing/registration in Florida
- L99000004547
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Stuart M. Gottlieb

Registered Office Address: 222 Lakeview Avenue, Suite 260
West Palm Beach, FL 33401

- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: Joel P. Koeppel

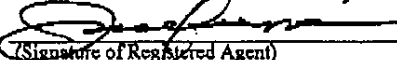
NEW Registered Office Address: 400 S. Australian Avenue, Suite 300
(MUST BE FLORIDA STREET ADDRESS) West Palm Beach, FL 33401

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)

Sylvia Barnett, Manager
(Printed or typed name of signee)

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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability 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

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