

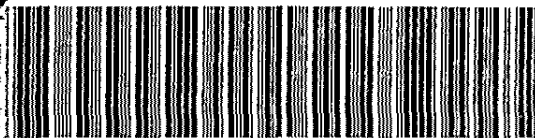
# L990000008612

Sender's Name \_\_\_\_\_ Phone 954 776-7004

Company RADER & LEMAIRE PA

Address 901 W CYPRESS CREEK RD STE415

City FORT LAUDERDALE State FL ZIP 33309-1857



300043516463

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

12/29/04--01031--009 \*\*35.00

Special Instructions to Filing Officer:

Name  
Availability

Document  
Examiner

DCC

Updater

Office Use Only

Updater  
Verifier

DCC

Acknowledgement

DCC

W. P. Verifier

DCC

SECTION 607.01  
TALLAHASSEE

2004 DEC 29 A 11:32

FILED

LAW OFFICE  
**SADER & LeMAIRE, P.A.**  
A PROFESSIONAL ASSOCIATION

Robert L. Sader\*  
Michael R. LeMaire

\* Also admitted in Ohio  
(Inactive)

Via Federal Express

December 28, 2004

Secretary of State  
Division of Corporations  
Attention: Amendment Section  
409 East Gaines Street  
Tallahassee, FL 32399

Re: COIN ACQUISITION, L.L.C., a Florida limited liability company

Dear Sir or Madam:

Enclosed please find a Statement of Change as to the Registered Agent for the above entity. A check for \$35 each are also enclosed. Please change your records accordingly.

If you have any questions or comment, please feel free to call me.

Thank you for your attention to this matter.

Very truly yours,



Michael R. LeMaire, Esq.

Encls.

FILED  
2004 DEC 29 A 11:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: COIN ACQUISITION, L.L.C.
2. The mailing address of the limited liability company is : 6300 N.E. 1ST AVENUE, 3RD FLOOR  
FORT LAUDERDALE, FL 33309

12/06/1999

L99000008612

3. Date of filing/registration in Florida

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:

ROBERT ROSCHMAN

Name

6300 N.E. 1ST AVENUE, 3RD FLOOR

Address

FORT LAUDERDALE, FL 33334

City, State and Zip

6. The name and address of the new registered agent and/or office:

ROBERT L. SADER, ESQ.

Name

1901 W. CYPRESS CREEK ROAD SUITE 4

Florida street address (P.O. Box **NOT** acceptable)

FORT LAUDERDALE, FL 33309

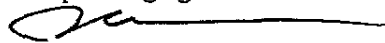
City, State and Zip

SECRETARY OF  
TALLAHASSEE

2000 DEC 29 A 11:32

FILED

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)

JEFFREY ROSCHMAN, MANAGING MEMBER

(Printed or typed name of signer)

*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