

L99000008871

Requester's Name
7603 Estrella Cir.
Address
Boca Raton, FL 33433-1632
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- 1. _____ (Corporation Name) _____ (Document #) **400003747294--7**
-02/22/01--01054--005
*****25.00 *****25.00
- 2. _____ (Corporation Name) _____ (Document #)
- 3. _____ (Corporation Name) _____ (Document #)
- 4. _____ (Corporation Name) _____ (Document #)

- Walk in Pick up time Certified Copy
- Mail out Will wait Photocopy Certificate of Status

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NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

L99-8871
JK

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

March 9, 2001

FERNAN JARAMILLE
7603 ESTRELLA CIRCLE
BOCA RATON, FL 33433-1632

SUBJECT: WESTEND OF MIAMI, L.C.
Ref. Number: L99000008871

We have received your document for WESTEND OF MIAMI, L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 201A00014514

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

February 23, 2001

FERNAN JARAMILLO
7603 ESTRELLA CIRCLE
BOCA RATON, FL 33433-1632

SUBJECT: WESTEND OF MIAMI, L.C.
Ref. Number: L99000008871

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Tammi Cline
Document Specialist

Letter Number: 101A00011453

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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: Westend of Miami, LLC.
2. The mailing address of the limited liability company is : 7603 Estrella Circle
Boca Raton, FL 33433

3. Date of filing/registration in Florida 02/20/01 4. Document number 199000008871

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Dade Corporate Services
Name
2200 Coral Way, Suite 103
Address
Miami, FL 33145
City, State and Zip

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

Fernan Ibramilla
Name
7603 Estrella Circle
Florida street address (P.O. Box NOT acceptable)
Boca Raton, FL 33433.
City, State and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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]
(Signature of member or authorized representative of a member)

(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]
(Signature of Registered Agent)

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