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(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	04/28/03
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April 29, 2003

Brenda Tadlock
Sr. Corporate Section Administrator
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Ms. Tadlock:

As per our telephone conversation today, I am forwarding the \$205.00 check for SMG/LMI, LLC reinstatement back to you. As I noted, the reinstatement form was sent to you on April 22, 2003. Enclosed is a copy of that form.

If you have any questions, please contact me at 215-861-0441.

Thank you.

Sincerely,

Jacked Members

Enclosures

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: SMG/LMI, LLC

2. The mailing address of the limited liability company is: 701 Narket St. 4th Fl.

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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

Plantation FL 33324

City, State and Zip

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 of authorized representative of a member)

(Printed or typed name of signee)

Signature of Registered Agent)

Assistant Secretary

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

FILING FEE: \$25.00