M05000003095

Florida Department of State
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From:
Account Name : LEVINE & PARTNERS, P.A.
Account Number : 074677001117
Phone : (305)372-1350
Fax Number : (305)372-1352

REGISTERED AGENT CHANGE

585PS, LLC

Certificate of Status	0
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: 685PS, LLC

2. The principal office address: 3250 Mary Street, Suite 306, Miami, Florida 33133

3. The mailing address (if different):

4. Date of incorporation/qualification: June 8, 2005 Document number: M05000003095

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Carol Ogden/Styles Holdings, LLC

3250 Mary Street, Suite 306

Miami, Florida 33133

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Alan W. Levine, Esquire

1110 Brickell Avenue, Seventh Floor
(P.O. Box NOT acceptable)

Miami, Florida 33131

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

(Signature of an officer or director) Paul C. Steinfurth (Printed or Typed name and title)

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

ALAN W. LEVINE ESQ
(Typed or Printed Name)

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MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
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