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NewCo Corporate Services, Inc.

875 Avenue of the Americas Suite 501 New York, NY 10001

Telephone: (212) 356-8340

Internet Address: theresa350@aol.com

Fax: (212) 356-8379

March 12, 2004

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

RE: USANI SUB LLC

Dear Sir/Madam:

Enclosed please find Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company. Please file the attached and return a filed-stamped copy to the attention of the undersigned at the above address.

If there is a problem, please contact the undersigned immediately at the following toll-free number 1-888-336-3926.

Thanking you in advance for your prompt attention to this matter.

Sincerely yours,

Theresa Festa

Senior Corporate Specialist

Check#- 18591- 8 25.00

Merisa Lesta

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: USANI Sub LLC
	The mailing address of the limited liability company is: 152 West 57th Street, 42nd floor, New York,
Ne	ew York 10019
O	ctober 13, 1998 M98000001171
3.	Date of filing/registration in Florida 4. Document number
	The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
	CT Corporation System
	Name
	1200 South Pine Island Road
	Address
	Plantakan FI 00004
	City, State and Zip
6.	City, State and Zip The name and address of the new registered agent and/or office:
	NRAI Services, Inc.
	Name Name
	526 E. Park Avenue
	Name 526 E. Park Avenue Florida street address (P.O. Box NOT acceptable)
	Tallahassee FL 32301
	City, State and Zip
cc an lia	the limited liability company is not organized under the laws of the State of Florida, it is hereby onfirmed 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 ability 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 e operating agreement of the limited liability company.
	Joseph Rich
(S	ignature of member or authorized representative of a member)
_	oranne Hawkins Printed or typed name of signee)
(S	hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to amply 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 hapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office differences, I hereby confirm that the limited liability company has been notified in writing of this change. RAI Services. Inc. Confirm that the limited liability company has been notified in writing of this change. Confirm that the limited liability company has been notified in writing of this change. Confirm that the limited liability company has been notified in writing of this change. Confirm that the limited liability company has been notified in writing of this change. Confirm that the limited liability company has been notified in writing of this change. Confirm that the limited liability company has been notified in writing of this change. Confirm that the limited liability company has been notified in writing of this change. Confirm that the limited liability company has been notified in writing of this change. Confirm that the limited liability company has been notified in writing of this change. Confirm that the limited liability company has been notified in writing of this change. Confirm that the limited liability company has been notified in writing of this change. Confirm that the limited liability company has been notified in writing of this change. Confirm that the limited liability company has been notified in writing of this change. Confirm that the limited liability company has been notified in writing the limited liability company has been notified in writing the limited liability company has been notified in writing the limited liability company has been notified in writing the limited liability company has been notified in writing the limited liabili
	Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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