ACCOUNT NO.

: 072100000032

REFERENCE

262004

4303929

AUTHORIZATION

COST LIMIT

Patricia quit

ORDER DATE: June 3, 1999

ORDER TIME : 12:49 PM

ORDER NO. : 262004

CUSTOMER NO: 4303929

CUSTOMER: Mr. Michael T. Rudewicz

Greenberg Traurig 1221 Brickell Avenue

20th Floor

Miami, FL 33131

CHANGE OF AGENT

G.F.B. ENTERPRISES, L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Tamara Odom

13/99

99 JUN -3 PH 4: 38

## 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 compan	ny is:G	G.F.B.	ENTERPRI	SES,	L.L.C	•	· -
2. The mailing address of the limited liabili	lity compa	my is <u>:</u>	10943 s.	Dixi	le Higl	hway	<u>,                                    </u>
Miami, FL 33156	•						
12/28/98			м9800000	1598			
3. Date of filing/registration in Florida	<del>-</del>		4. Doc	ument r	ıumber		<del></del>
5. The name of the registered agent and the Florida Department of State:	: registered	d office a	iddress as sho	wn on	the record	ds of t	he
CT_CORPORA	TION S	YSTEM			_		
	Nam						,,,,,
1200 South			Road		_	9	₹
·	Addre					٦	<u> </u>
Plantation C	1, FL 3	3324				Œ	经
		_				8- NNF 66	유로누
6. The name and address of the new register	red agent	and/or o	ffice:		-	PH	25 E
CORPORATIO	N SERV	ICE CO	MPANY			4:	25°C
		Name				: 38	AT AT
<u> 1201 Hayş</u>	Street	: : 		, 		æ	
Florida street add	dress (P.C	). Box <b>N</b> C	T acceptable	)			S
Tallahas	see,	FL	32301				
-	City, St	ate and Z	lip .			•	
If the limited liability company is not org confirmed that after the change or changes and the business office of the registered a liability company, it is hereby confirmed that a majority of the members of the limited organization or the regulations of the limited	s are mad agent will at the char	e, the Fl be iden nge(s) wa	orida street a tical. Or, in as/were autho	ddress the ca rized by	of the re se of a z an affir	gistere Florida mative	ed office a limited vote of
(Signature of a member of authorized representative of a	member)	······································					
GERALD F. BEAN					•		
(Printed or typed name of signee)	· · · · · · ·	<del></del>			-		
I hereby accept the appointment as register comply with the provisions of all statutes reand I am familiar with and accept the document is being filed to merely reflect a the limited liability company has been notification.	red agent relative to obligation change ir Ted in wri	and agr the prop s of my i the reg ting of th	ee to act in to per and comp position as istered office is change.	iis capo lete per registei address	icity. I f formance red agen s, I hereb	urther e of m t. Oi y con;	agree to y duties, r. if this firm that

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

INHS18(9/97)

(Signature of Registered Agent)

**FILING FEE: \$35.00**