P0100009443

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only
2 A RO Change 10 11.5.04
10 11.5.04



10/29/04--01025--002 **35.00

FILED 04, OCT 29 PM 4: 05 FALLAHASSEE, FLORID

COVER LETTER

TO: Amendment Section **Division of Corporations**

L & M Investments, Inc. SUBJECT:_

(Name of corporation)

P0100009443 DOCUMENT NUMBER:

TALLAHASSEE FLORING The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

R. Lawrence Bonner, Esq. (Name of contact person)

HomerBonner

(Firm/Company)

The Four Seasons Tower, 1441 Brickell Avenue, Suite 1200 (Address)

Miami, Florida 33131 (City/state and zip code)

For further information concerning this matter, please call:

305) 350-5100 (Area code & daytime telephone number) R. Lawrence Bonner (Name of contact person) at (305

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

1. The name of the corporation: <u>L & M Investments</u>, Inc.

2. The principal office address: 1718 N.W. 39th Street, Oakland Park, Florida 33309

3. The mailing address (if different):___

4. Date of incorporation/qualification: <u>1/25/01</u> _____ Document number: <u>P01000009443</u>

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

Linda Enzinna <u>3511 W. Commercial Boulevard. #400</u> Fort Lauderdale. Florida 33309 6. The name and street address of the new registered agent (if changed) and /or registered office

> HomerBonner, The Four Seasons Tower, 1441 Brickell Avenue, Suite 1200 (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.

110 MAGI (Printed or typed name and title) Signahire of an officer or directed 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 auties, and I an familiar with and accept the obligation of my position as registered agent. Or, if this accument is being fleed merely to reflect a change in the registered office address, I hereby confirm that the compression has been notified in writing of this change. gnature of Registered Agent) If signing on behalf of an entity:

(Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314