

JAN 15 2004 FROM COBB & EBIN, P.A. 377 0224 D:Department of State P:1/2  
Division of Corporations Page 1 of 1

# P02000044666

Florida Department of State  
Division of Corporations  
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**REGISTERED AGENT CHANGE**

**NMBP CORP.**

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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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: NMBP CORP.
2. The principal office address: 1450 Madruga Avenue Suite 303 Coral Gables, FL 33146
3. The mailing address (if different): N/A

4. Date of incorporation/qualification: 04/24/2002 Document number: P02000044666

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

Linda Ebin
1399 SW First Avenue Suite 301
Miami FL 33130

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

Linda Ebin
825 Brickell Bay Drive, Suite 1648
Miami, FL 33131-2920

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]
(Signature of an officer or director)

Eugenio Coscolluela, Jr., President
(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]
(Signature of Registered Agent)

1/14/04
(Date)

Linda Ebin
If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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

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