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R.A. Clark

C. Coulliette MAR 1 4 2005

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: / UCIO Truestments & Holdings Inc., (Name of corporation)
DOCUMENT NUMBER: P 03 0 80 0 6/903
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:
Maure en Hogan (Name of contact person)
Lucio Investments + Holdings, Inc
6830 Vig Reging
Bocq Raton F/ 33433 (City/state and zip code)
For further information concerning this matter, please call:
Vincent L. Verdiramo Esq. at (201) 798-7082 (Name of contact person) (Area code & daytime telephone number) Attorney at Law of the State of flor; do Enclosed is a \$35.00 check made payable to the Department of State.
Attorney at Law of the State of Flor; da
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

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 Harida in order to change its registered office or registered agent, or both, in the State of Florida.
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1. The name of the corporation: Lucia Lives TMENTS & Holdings, Lac.
2. The principal office address: 6830 Via Reging, Bocg Katan, F1 33133
3. The mailing address (if different):
4. Date of incorporation/qualification: 6/2003 Document number: P0300006/903
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Mark (ohen CPA = == ===========================
1772 East Trafalagar Circle
1/1/2 32 A 24
Hollywood, 1/11/194 33000 TS 20 M
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
6830 Via Regina (P.O. Box NOI acceptable)
Boca Raton F1 33433
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.
Moureen Magen Sec (Signature of an opper or director) Maureen Magen Sec
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.
Mon Hogy 3/1/85 (Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Maureen Hoggy
(Lymod of Printed Name) I '

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