(Requestor's Name) (Address)	500113330
(City/State/Zip/Phone #)	12/24/07010120
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	SECRE TARY TALLAHASSE
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: 321 NVestment Corp (Name of Corporation)	
DOCUMENT NUMBER: <u>P050000543</u>	
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:	
Mery LODIZ (Name of Contact Person)	
Meny Lopez, P. A. (Firm/Company)	
150 NW 148 Street, Svite 214	
North Miami Beach, FI. 33169 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Mey Dol2 at (305) 382-2739 (Area Code & Daytime Telephone Number)	
Enclosed is a \$35.00 check made payable to the Department of State.	
Mailing Address: Amendment Section Division of Corporations Division of Corporations Division of Corporations	

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

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 \(\frac{\frac{10 \text{n}}{0}}{10} \)
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: 321 Investment Corp
2. The principal office address: 4801 S. University Drive, Swite 243
Davie, FL. 33328
3. The mailing address (if different):
4. Date of incorporation/qualification: 41222005 Document number: 905000054277
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
<u>Eliqio Bonilla</u>
4801 S. University Drive, Swite 2123 =
Davie, FL. 33328
6. The name and street address of the new registered agent (if changed) and /or registered of the control of th
Mery Lopez Fish 5
150 NN 168 Street, Suite 214 5 5
North Miami Beach, FL. 33/49
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 of Action of Director) Miguel A. Cevar, President (Printed or typed name and title)
I hereby ac cept the appoin tment 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 familia the performance of my duties, and I am familia the 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 of Rogistered Agent) (Signature of Rogistered Agent)
If signing on behalf of an entity:
(Tuned or Printed Name)

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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