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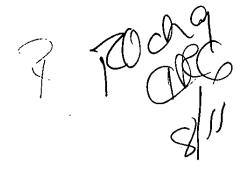
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ALLAHASSEE, PLORID



## **COVER LETTER**

TO: Amendment Section Division of Corporations					
SUBJECT: RAG INVESTMENTS USA INC (Name of Corporation)					
DOCUMENT NUMBER: P070000 13699					
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:					
RAFAEL ARANGO					
(Name of Contact Person)					
RAG INVESTMENTS USA INC (Firm/Company)					
(Firm/Company)					
5487 W 27 AV (Address)					
(Address)					
AIALEAH GARDENS, FL 33016 (City/State and Zip Code)					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
RAFAEL ARANGO at (786) 3/46942  (Name of Contact Person) (Area Code & Daytime Telephone Number)					
(Name of Contact Person) (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 P.O. Box 6327  Street Address: Amendment Section Division of Corporations Division of Corporations Clifton Building					
Tallahassee El 32314 2661 Evecutive Center Circle					

Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 6 nge is submitted for a corporation organized r to change its registered office or registered	l under the laws of the	State of FL	
1. The name of the	the corporation: RAE INVE office address: IY87 W Z Hialah Ger	ST MENTS	USA IN	10
3. The mailing a	ddress (if different): 5497W 2		33016	
4. Date of incorp	poration/qualification: 01/29/200	ት Document number:	P0+000	013699
5. The name and	I street address of the current registered agen tment of State:			
	ARANGO, RAFAEL		<u> </u>	
	300 745+ unit	8		36 36 36
	miami beach , FL	. 33141		≥ 224
6. The name and (if changed):	I street address of the new registered agent (i	f changed) and /or reg	istered office	IG-7 PH 9: 08 PTARY OF STATE HASSEE, FLORIDA
	ARANGO, RAFAEL			18 J
	548+ W 27 AV			
	(P.O. Box NOT acceptable) Hialeah Gardens, F	-ر 33016		
The street addre	ess of its registered office and the street add be identical.	dress of the business	office of its registe	ered agent,
Such change wa authorized by the	as authorized by resolution duly adopted be board, or the corporation has been notified.	y its board of director led in writing of the c	s or by an officer hange.	so
(Signatu	ard of an officer or director)	RAFAEL A	PANGO !	<u>P.</u>
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered agent and a to comply with the provisions of all statute ad I am familiar with and accept the obliga ing fled merely to reflect a change in the r been notified in writing of this change.	s relative to the propo tion of my position as egistered office addre	er and complete n	erformance . Or, if this rm that the
	gnature of Registered Agent) chalf of an entity:	(0	ate)	
(1	Typed or Printed Name)			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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