P07000090394

(Re	equestor's Name)			
(Ac	ldress)			
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TB ILLZAC

COVER LETTER

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

statement of cha	inge is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Storganized under the laws of the State of \overline{F} registered agent, or both, in the State of Flo	LORIDA
1. The name of	the corporation: STR GROUP,	INC.	
2. The principal	office address: 3550 BISCAYN	IE BLVD SUITE 402, MIAMI, FL 3	3137
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: AUG 10TI	H 2007 Document number: P070000	090394
	I street address of the current register trment of State: (If resigned, enter re	ered agent and registered office on file with esigned)	the
	RAFAEL MOTTA - RESIGN	IED	
	3730 SW 51 ST		7 2 E
	FT LAUDERDALE, FL 3313	2	ZUOO NOV -7 ZECRETAR SECRETAR SECRETAR
6. The name and (if changed):	d street address of the new registered	d agent (if changed) and /or registered offic	ma - r
	SERGIO NERCESSIAN	·	ESE T
	342 SW 28TH RD (P.O. Box NOT acc		26 RID
	MIAMI, FL 33129	epiable)	
The street addreas changed will		street address of the business office of its	registered agent,
Such change was authorized by the	as authorized by resolution duly ac ne board, or the corporation has be	dopted by its board of directors or by an oren notified in writing of the change.	officer so
SERGIO NERCESSIAN, PRESIDENT (Printed or typed hame and title)			
I hareby accept I further agree of my duties, an document is bei corporation has	the appointment as registered age to comply with the provisions of a d I am familiar with and accept th ng filed merely to reflect a change s been notified in writing of this ch	ent and agree to act in this capacity. Il statutes relative to the proper and comple to obligation of my position as registered to in the registered office address, I hereby ange.	plete performance agent. Or, if this v confirm that the
- Jup	gnature of Registered Agent)	11/04/08 (Date)	· · · · · · · · · · · · · · · · · · ·
	half of an entity:		
(7	alkfjsaldkfj 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 * * *