

PO 7000098286

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 MAR -3 PM 4: 01

T. Roberts MAR 03 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 6, 2009

ALBERTO DE LA IGLESIA
OSBORNE USA INC
4800 ORDUNA DR
CORAL GABLES, FL 33146

SUBJECT: OSBORNE USA, INC.
Ref. Number: P07000098286

We have received your document for OSBORNE USA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears that you completed the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 909A00004334

RECEIVED
2009 MAR -3 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: OSBORNE USA INC.
(Name of Corporation)

DOCUMENT NUMBER: P070000 98286

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:

GLORIA PASCUAL - WILLINGER
(Name of Contact Person)

Y H A S ACCOUNTING SERVICES
(Firm/Company)

2875 NE 191 STREET, SUITE 302
(Address)

AVENTURA, FLORIDA 33180
(City/State and Zip Code)

For further information concerning this matter, please call:

GLORIA PASCUAL at (305) 936-1274
(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
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: OSBORNE USA, INC.
2. The principal office address: 4800 ORDUNA DR.
CORAL GABLES FL 33146
3. The mailing address (if different): 2875 N.E. 191 ST. STREET
SUITE 302, AVENTURA FLORIDA 33180
4. Date of incorporation/qualification: 12/19/1995 Document number: P07000098286
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

ALBERTO DE LA IGLESIA
4800 ORDUNA DRIVE
CORAL GABLES FL 33146

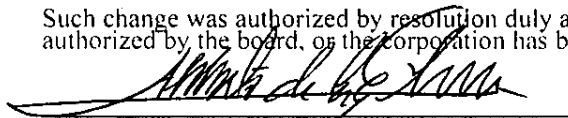
FILED
DIVISION OF CORPORATIONS
09 MAR - 3 PM 4:01

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

GLORIA PASCUAL - WILLINGER
2875 NE 191 STREET, SUITE 302
(P.O. Box NOT acceptable)
AVENTURA, FLORIDA 33180

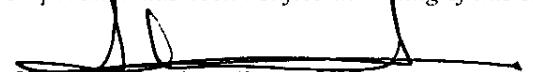
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 an officer or director)

ALBERTO DE LA IGLESIA
(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 of Registered Agent)

2/25/2009
(Date)

If signing on behalf of an entity:

GLORIA PASCUAL - WILLINGER
(Typed or Printed Name)

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

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