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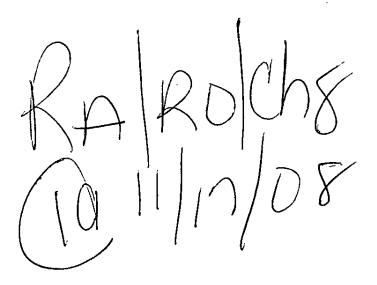


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SECRETARY OF STATE



## **COVER LETTER**

Amendment Section Division of Corporations

TO:

	•			
SUBJECT: TRASATLANTIC INVESTMENTS CORPORATION (Name of Corporation)				
	(Marile of Corp	oration)		
DOCUMENT NUMBER: P08	000096614			
The enclosed Statement of Change	e of Registered Office/A	gent and fee are submitted for filing.		
Please return all correspondence c	oncerning this matter to	the following:		
	Michael (Name of Conta	Ortiz ct Person)		
	Michael O	rtiz, P.A.		
	(Firm/Com	pany)		
1430 S. Dixie Highway Suite #321 (Address)				
	Coral Gable	s, FL 33146		
(City/State and Zip Code)				
For further information concerning	g this matter, please call	:		
Michael Ort (Name of Contact	iz Person)	at ( <u>305</u> ) 665-5270 (Area Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made p	payable to the Departme	ent of State.		
Division P.O. Box	ent Section of Corporations	Street Address: Amendment Section Division of Corporations Clifton Building		

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	<i>:</i> 
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Trasatlantic Investments Corporation	
2. The principal office address:	<u>-</u> -
3. The mailing address (if different): 4011 West Flagler Street Suite #503 Miami, FL 33134	
4. Date of incorporation/qualification: 12/08/2004 Document number: P08000096614	
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)	
Michael Ortiz, P.A. (Resigned)	
2121 Ponce de Leon Blvd. Suite #330	. 0
Coral Gables, FL 33146	I NOW BU
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	DB NOV 13 LM II: 19
Ricardo A. Juan	呈
4011 West Flagler Street Suite #503 (P.O. Box NOT acceptable)	وَ
Miami, FL 33134	
The street address of its registered office and the street address of the business office of its registered as changed will be identical.	agent,
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)  Ricardo A. Juan (Printed or typed name and title)	<del></del>
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 performs duties, and I am familiar with and accept the obligation of my position as registered agent. Of document is being filed merely to reflect a change in the registered office address, I hereby confirm a corporation has been notified in writing of this change.	rmance r, if this hat the
Signatury of Registered Agent) 11/12/2008 (Date)	
If signing on behalf of an entity:  (Date)	
(Typed or Printed Name)	

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