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CONCEPCION & SEXTON, LLP

A REGISTERED LIMITED LIABILITY PARTNERSHIP
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WARREN J. STAMM

June 3, 1999

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: L.D.L. Enterprises, Inc.

TO WHOM IT MAY CONCERN:

Enclosed please find a copy of the Statement of Change of Registered Office and Certified Copy of Resolutions of Board of Directors for filing with the Secretary of State. I have also enclosed our firm's check in the amount of \$35.00 to cover the filing fee. Please confirm that these documents were filed and the change effectuated; I have attached a self-addressed, stamped envelope for your convenience.

WJS/mem
Enclosure
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RTA Charge J-17.99

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STATEMENT OF CHANGE OF REGISTERED OFFICE ANY REGISTERED AGENT OF L.D.L. ENTERPRISES INC.

Pursuant to the provisions of sections 607.0502, 6170502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office and registered agent in the State of Florida.

- 1a. The name of the corporation is: L.D.L. ENTERPRISES, INC.
- 1b. Date of incorporation: April 19, 1995.
- 2. The name and address of the current registered agent and office: Juan Vicente Urdaneta 888 Brickell Avenue, 5th Floor Miami, FL 33131
- 3. The name and address of the new registered agent and office: Carlos F. Concepcion Concepcion & Sexton, LLP 999 Ponce de Leon Boulevard, Suite 1015 Miami, FL 33134

The street address of its registered agent 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.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.

SIGNATURE

DATE