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CORPORATION NAME	(S) AND DOCUMENT NUMBER	R(S) (if known):
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Profit NonProfit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A. Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	Certificate of FICHTIOUS NAME
Annual Report Fictitious Name Name Reservation	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other	CORP SEARCH ALLAHASSEE,
Ordered By:		

Date:

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Florida Department of State, Sandra B. Mortham, Secretary of State

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, the undersigned corporation organized under the laws of the State of submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1a. The name of the corporation is: PLAVE GOLDBERG & MANTEN, 1b. The mailing address of the corporation is: 3250 Mary Street, Ste. 301, Coconut Grove, FL 33133 1c. Date of incorporation:____ May 3, 1995 Document number: P95000034704 The name and address of the current registered agent and office: ALAN GOLDBERG 3250 MARY STREET, STE. 301 COCONUT GROVE, FL 33133 3. The name and address of the new registered agent and office: (P.O. Box Not Acc JEFFREY M. MANTEN 3250 MARY STREET, STE. 301 COCONUT GROVE, FL 33133 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. (Signature of an officer, chairman or vice chairman of the board) LAWRENCE S. PLAVE President (Printed or typed name and title) Having been named as registered agent and to accept service of process for the above stated corporation, I herebyaccept 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. If signing on behalf of an entity:

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

(Capacity)

JEFFREY M. MANTEN

(Typed or Printed Name)