CAPITAL CONNECTION INC. 417 E. Virginia Size J. Shite 1 Jallah ssee, Fly ida 623 (850) 224-8870 1-80-542-8867 Fax (8/0) 2/2-1/2

708NW4, Corp.	6000023526761
Signature	CID Partnership File Foreign Corp. File L.C. File L.C. File Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Owner Search Vehicle Search Vehicle Search
Requested by	Vehicle Search Vehicle Search Driving Record UCC I or 3 File UCC 11 Search UCC 11 Retrieval Courier

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 under submits th both, in the	the provisions of sections 607.0502, 617.0502, 607.1508, or 8 signed corporation organized under the laws of the e following statement in order to change its registered of its state of Florida.	517.1508, Florida Statutes State of ice or registered agent, o
1e. The nar	ne of the corporation is: 708NW4, Corp.	
1b. The ma	iling address of the corporation is: 250 Valencia	Avenue
	Coral Gables.	, Fl 33134
1c. Date of	fincorporation: 9/12/97 Document number:	P97000079088
	me and address of the current registered agent and office:	AES 9
	George Miller	NOV.
	250_Valencia_Avenue	AR)
	Coral Gables, FL 33134	me 3 III
3. The name	e and address of the new registered agent and office:(P.O. Bo	x Not Acceptable
•	Harris Millman	
	16105 N.E. 18th Avenue	
-		• ·
The street a	North Miami Beach, F1 33162 address of its registered office and the street address of t gent, as changed, will be Identical.	he business office of its
Such chang so authoriz	e was authorized by resolution duly adopted by its board of a supply the board.	directors or by an officer
		5/31/97
vice Vice	re of an officer, chairman or chairman or the board)	(Date)
Harris Mi	lllman, President	
Printel Havino bee	d or typed name and title) In named as registered egent and to accept earlies of pro-	see for the above states
corporation further ag performanc registered a	I hereby accept the appointment as registered agent and agines to comply with the provisions of all statutes relative to e of my duties, and I am familiar with and accept the obligant.	ree to act in this capacity, the proper and complete igation of my position as
	(0) (311	
(Signat	ure of Registered Agent)	(Date)
f signing on	behalf of an entity:	·
Harri	s Millman Proside	a #
	rieside	apacity)
	Division of Corporations, P.O. Box 6327, Tallahassee	FI 32214

FILING FEE: \$35.00

CR2E045(11/94)