Florida Department of State Division of Corporations

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JAG INVESTORS, INC.

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BOCA RATON FT. LAUDERDALE MIAMI ORLANDO TALLAHASSEE TAMPA WEST PALM BEACH

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Fax Audit No.: H05000274751 3

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha		607.1508, or 617.1508, Florida Statutes, this ed under the laws of the State of Florida ed agent, or both, in the State of Florida.		•
	ne corporation; JAG Investors, Inc.			_
	office address: 3250 Mary Street, Suit	e #500; Coconut Grove, FL 33133		_
3. The mailing a	ddress (if different): 3250 Mary Street	, Suite #500; Coconut Grove, FL 3313	3	_ _
4. Date of incorp	oration/qualification: 10/10/1997	Document number: P97000087765		_
	street address of the current registered agr iment of State:	ent and registered office on file with the		
	Stewart Marcus			
	3250 Mary Street, Suite #50	00	₹	
	Coconut Grove, FL 33133		SEC	95
6. The name and (if changed):	street address of the new registered agent	(if changed) and /or registered office	RETAR) AHASS	NOV:30
	Jane Marcus		E OF	_ ⊋
	3250 Mary Street, Suite #50	00	FLO FLO	نۃ ع≖
	(P.O. Box NOT acceptable)		꼰즈	
	Coconut Grove, FL 33133		DA.	32
The street address changed will	ess of its registered office and the street a be identical.	ddress of the business office of its registered	agent,	
Such change was authorized by the	is authorized by resolution duly adopted the board, or the corporation has been not	by its board of directors or by an officer so ified in writing of the change.		
	Naura	Jane Marcus, Director		
	to the and different for disconting	(Printed or typed rains and title)		
I hereby accept I further agree of my duties, an document is bel corporation has	the appointment as registered agent and to comply with the provisions of all statu of I amiliar with and accept the obli- ng fued merety to reflect a change in the best of the same of the continuous of this change.	l agree to act in this capacity, vies relative to the proper and complete perfor gation of my position as registered agent. Or, registered office address, I hereby confirm th	mance If this lat the	
->-		November 28, 2005		
If signing on bo	half of an entity:			
	N/A Typed or Printed Name)	1 As		
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MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEB, FL 32314

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