Packman, Neuwahl & Rosenberg

SUITE 125

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MARK R. STARKMAN . BERNARD WOLFSON OF COUNSEL

STACY L. OSSIN

May 11, 1998

PLEASE REPLY TO: CORAL GABLES OFFICE

CERTIFIED MAIL # Z 141 662 953 RETURN RECEIPT REQUESTED

Secretary of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314 702524309---05/14/98--01121-002 *****35.00 *****35.00

Gratigny Managers, Inc. (the "Corporation") Our File No. 1076DD(a)

Gentlemen:

Enclosed herewith please find an original and one (1) copy of the Statement of Change of Registered Office or Registered Agent or Both for Corporations (the "Form") for the above-referenced Corporation. Also enclosed is a check in the amount of Thirty-Tive Dollars (\$35.00) for the filing fee.

Please acknowledge your receipt of the Form and check by signing the enclosed acknowledgment copy and returning it in the envelope provided. Also, please send me the copy of the Form upon filling.

Thank you for your cooperation in this matter. If you have any questions, please do not hesitate to contact me.

Very truly yours,

PACKMAN, NEUWAHL & ROSENBERG

DEBRA A. BARNES Legal Assistant

Enclosures 5/6*1076

MAY 2 6 1998

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

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

	<u>-</u>	, 617.0502, 607.1508, or 617.1508, Florida Statutes, the s of the State of
	owing statement in order to chan	ge its registered office or registered agent, or both, in the
1. The name of	the corporation is: Grati	gny Managers, Inc.
		<u> </u>
2. The mailing a	address of the corporation is:	14445 N.E. 20th Lane
		North Miami, FL 33181-1446
	poration/qualification: <u>Januar</u> d address of the current registered	agent and office: P9800007553
	UCC Filing & Search Se	rvices, Inc.
	526 E. Park Avenue	
	Tallahassee, FL 32301	
5. The name and	d address of the new registered ag	ent and office: (P.O. Box Not Acceptable)
	Mike Nunez	-
	14445 N.E. 20th Lane	
	North Miami, FL 33181-	
		· · · · · · · · · · · · · · · · · · ·
agent, as change	ess of its registered office and the ed, will be identical.	street address of the business office of its registered
Such change was authorized by th	is authorized by resolution duly ac se board.	lopted by its board of directors or by an officer so
\mathcal{M}	ul -	idadad
(Signature of an off	icer, chairman or vice chairman of the box	rd) (Date)
		typed name and title)
Having been nat I hereby accept comply with the and I am familia	med as registered agent and to ac the appointment as registered age provisions of all statutes relative ar with and accept the obligation	ccept service of process for the above stated corporation, ent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, of my position as registered agent.
	line_	uh lad
(Signature	of Registered Agent)	(Date)
If signing on be	half of an entity:	•
	, '	•
(Typed or	Printed Name)	(Capacity)

FILING FEE: \$35.00

CR2E045(1/95)