P9800092251

	FILING COVER SHEET
REFERENCE:	0280.4427
DATE:	11-9-98
CONTACT:	CINDY HICKS
FROM:	CORPORATE & CRIMINAL RESEARCH SERVICES
	103 N. MERIDIAN STREET
	TALLAHASSEE, FL 32301 Chause
TELEPHONE:	222-1173
SUBJECT:	Mumotab, Inc
STATE FEES PREPAID W	
	() AMENDMENT () DISSOLUTION
() ARTICLES OF INC. () ANNUAL REPORT	() MERGER () WITHDRAWAL
() QUALIFICATION	() LIMITED PARTNERSHIP () ANNUAL REPORT
() FICTITIOUS NAME	() LIMITED LIABILITY () REINSTATEMENT
() TRADEMARK/SERVICE	
PROVIDE US WITH: () CERTIFIED COPY	() CERTIFICATE OF STATUS () STAMPED COPY
	2000026834323 -11/09/9801080015
Examiner's Initials	*****35.00 ******35.00

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, 60 the undersigned corporation organized under the submits the following statement in order to change its reboth, in the State of Florida.	07.1508, or 617.1508, Florida Statutes, laws of the State of egistered office or registered agent, or
1a. The name of the corporation is:	3C
1b. The mailing address of the corporation is: 1600 / Hollywood FL 33020	V. 28th Court
1c. Date of incorporation: October 29, 1998 Docum	nent number: <u>P9800009a2</u> 57
2. The name and address of the current registered agent Lorpdirect Agents 103 N. Mendian St. Lou Tallahassee FL 3230	ver Level Zee 8
3. The name and address of the new registered agent and Sherise L. Murillo 1600 N. 28 th Court Hollywood FL 33020	ASSEE, FLORI
The street address of its registered office and the street registered agent, as changed, will be identical.	
Such change was authorized by resolution duly adopted by so authorized by the board.	y its board of directors or by an officer
(Signature of an officer, chairman or vice chairman of the board)	(Date)
MICHAEL MURILLO, President (Printed or typed name and title)	-
Having been named as registered agent and to accept so corporation, I hereby accept the appointmentas registered I further agree to comply with the provisions of all status performance of my duties, and I am familiar with and acregistered agent.	service of process for the above stated agentand agree to actin this capacity. tes relative to the proper and complete ccept the obligation of my position as
Muie I Muillo	// 4/98 (Date)
(Signature of Registered Agent) If signing on behalf of an entity:	12221
SHERISE L. MURILLO	
(Typed or Printed Name)	(Capacity)

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