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

statement of cha	provisions of sections 607.0502, 617.050 inge is submitted for a corporation organ ir to change its registered office or regist	nized under the laws of the State of FL	ORIDA	
1. The name of t	the corporation: LAS*OLAS INT'L INV	/ESTMENTS INC ·		
2. The principal	office address: EHAD HAAM 6 STRE	EET, TIBERIAS, ISRAEL 14100		
3. The mailing a	ddress (if different): 2320 HOLLYWO	DOD BLVD. HOLLYWOOD, FL	33020	
4. Date of incorp	poration/qualification: 03/22/99	Document number: P0990000	25874	
	d street address of the current registered a tment of State:	gent and registered office on file with the	ne	
	JACK OVED			
	9941 SW 4TH STREET			
	PLANTATION, FL 33324		2007 SEI	
6. The name and street address of the new registered agent (if changed) and /or registered offic (if changed):		2007 HOY -5 SECRETAR TALLAHASS	CENTER OF THE PERSON NAMED IN COLUMN NAMED IN	
	HOFFMAN, LEVY, BENGI	O & CO	PH PH	
	2320 HOLLYWOOD BLVD		PM 1: 00 OF STATE E. FLORIDA	فعييط
	(P.O. Box NOT acceptable HOLLYWOOD, FL 33020)) 0	
The street addre	ess of its registered office and the street be identical.	address of the business office of its re	gistered agent,	
	as authorized by resolution duly adopted to board, or the corporation has been no			
- (Signati	re of an officer or director)	Zolfac VEP (Printed or typed name and title)		
I hereby accept I further agree of my duties, an document is bei corparation has	the appointment as registered agent an to comply with the provisions of all stat and I am familiar with and accept the obl ing filed merely to reflect a change in the s been notified in writing of this change	nd garee to get in this canacity		
Mfm, Le	Pharure of Registered Agent)	10/11/17 (Date)		
If signing on be	half of an entity:			
	Typed or Pripted Name)			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *

CR2E045 (8/05)