F HB LEVIN, Inc. 640 N.E. 14 <sup>th</sup> Ave. Ft. Lauderdale, FL 33304_ Address	
City/State/Zip Phone #	# <b>300003355843</b>
CORPORATION NAME(S) & DOCU	Office Use Only UMENT NUMBER(S), (if known):
1(Corporation Name)	(Document #)
2(Corporation Name)	(Document #)
3 (Corporation Name)	(Document #)
4 (Corporation Name)	(Document #)
<ul> <li>Walk in</li> <li>Mail out</li> <li>Will wait</li> </ul>	
NEW FILINGS	AMENDMENTS
<ul> <li>Profit</li> <li>Not for Profit</li> <li>Limited Liability</li> <li>Domestication</li> <li>Other</li> </ul>	<ul> <li>Amendment</li> <li>Resignation of R.A., Officer/Director 8</li> <li>Change of Registered Agent</li> <li>Dissolution/Withdrawal</li> <li>Merger</li> </ul>
OTHER FILINGS <ul> <li>Annual Report</li> <li>Fictitious Name</li> </ul>	REGISTRATION/QUALIFICATION & T

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of <u>FLOKIDA</u> submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: <u>HB LEVIN, INC.</u>

- 2. The mailing address of the corporation is: 640 N.E. 14<sup>th</sup> AVE.

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3. Date of incorporation/qualification: <u>09-23-99</u> Document number: <u>P990000846</u>84

4. The name and address of the current registered agent and office:

CORPORATION SERVICE COHPANY

1201 HAYS STREET

TALLAHASSEE, TL 32301

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

HERBERT LEVIN

640 N.E. 14 AVE.

FT. LAUDERDALE FL 33304

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized with the board.

<u>08-07-00</u> UmOl w RaU (Signature of an officer, chairman or vice chairman of the board)

HANAUSEK - LEVIN (Printed or typed name and title) BEATRIX PRESIDENT

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and Lam familiar with and accept the obligation of my position as registered agent.

Habe	(Signature of Registered Agent)	tent	(Date)		8	_
If signing on be	shalf of an entity:		· · · ·	AHASSI	AUG 1	
	(Typed or Printed Name)	<u> </u>	(Capacity)		-	-
* * * FILING FEE: \$35.00 * * *					PH 3:	
CR2E045(7/97)	DIVISION OF CORPORATIONS	P.O. Box 6327	Tallahassee, FL 3	-Orif 2314	61	