V04153

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COVER LETTER

TO: "Amendment Division of	t Section Corporations	
SUBJECT: Inves	stment Management Associa	tion
	(Name of Cor	poration)
DOCUMENT NUM	MBER: V04153	
The enclosed Statem	nent of Change of Registered Office/	Agent and fee are submitted for filing.
Please return all cor-	respondence concerning this matter to	o the following:
	Jacqui W	ebley
_	(Name of Conta	act Person)
	Investment Manage	
_	(Firm/Con	apany)
	1575 San Ignacio	, Suite 100
	(Addre	ss)
	Coral Gables, FL	··
	(City/State and	Zip Code)
For further informat	ion concerning this matter, please ca	II:
Jacqui Webley		at (305) 661-0110
	ne of Contact Person)	at (305) 661-0110 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00	check made payable to the Departm	ent of State.
	Mailing Address:	Street Address:
	Amendment Section	Amendment Section
	Division of Corporations	Division of Corporations
•	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle
		Tallahassee, FL 32301

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, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Investment Management Associates, Inc.
2. The principal office address: 1575 San Ignacio, Suite 100
Coral Gables, FL 33146
3. The mailing address (if different):
4. Date of incorporation/qualification: 01/06/1992 Document number: V04153
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Matt D. Goldman, Esq.
1450 Madruga Ave. Ste. 203
Coral Gables, FL 33146
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
JACQUELINE WEBLEY
1.575 SALL IGHACIO AVE. S. (00) (P.O. Box NOT acceptable)
CORAL CHABLES FC. 33146
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 by the board, or the corporation has been notified in writing of the change.
(Signature of an officer or director) RACH SHEPPARA (Printed or typed name and title)
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 I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. I hereby confirm that the corporation has been notified in writing of this change.
Saguele: Well (Signature of Registered Agant) (Date)
If signing on behalf of an entity:
(Typed or Printed 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 * * *