

L04 0000 85497

(Requestor's Name)

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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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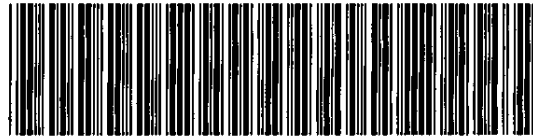
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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Kite Mix MARKETING, LLC
(Name of Corporation)

DOCUMENT NUMBER: L04000085497

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALFONSO CORONA
(Name of Contact Person)

Kite Mix MARKETING, LLC
(Firm/Company)

2332 GALIANO ST, 2ND FLOOR
(Address)

CORAL GABLES, FL 33134
(City/State and Zip Code)

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SECRETARY OF STATE

For further information concerning this matter, please call:

ALFONSO CORONA at (305) 728-7172
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 21, 2006

ALFONSO CORONA
2332 GALIANO ST 2ND FL
CORAL GABLES, FL 33134

SUBJECT: KITE MIX MARKETING, LLC
Ref. Number: L04000085497

We have received your document for KITE MIX MARKETING, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 406A00051327

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TALLAHASSEE, FLORIDA

STATEMENT OF CHANGE OF REGISTERED OFFICE, OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company 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 limited liability company is: Kite Max Marketing LLC

2. The mailing address of the limited liability company is: 2332 GAUANO ST.
2ND FLOOR, CORAL GABLES, FL 33134

3. Date of filing/registration in Florida 11/24/2004

4. Document number L 04000085497

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Lopez, Alfredo R.
Name
2332 GAUANO ST.
Address
CORAL GABLES, FL 33134
City, State and Zip

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TALLAHASSEE, FLORIDA

6. The name and address of the new registered agent and/or office:

Alfonso Corona
Name
2332 GAUANO ST.
Florida street address (P.O. Box NOT acceptable)
CORAL GABLES, FL 33134
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
(Signature of a member or authorized representative of a member)

Alfonso Corona
(Printed or typed name of signee)

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00