

L11000028183

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

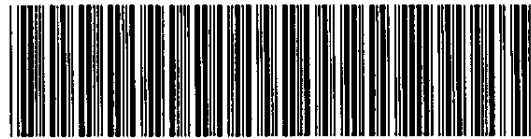
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400250220274

08/08/13--01004--006 \*\*25.00

FILED  
2013 AUG - 8 PM 12: 12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG -9 2013  
J. BRYAN

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CARIBBEAN JOURNAL, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alexander C. Britell  
Name of Person

Caribbean Journal, LLC  
Firm/Company

1101 Brickell Avenue - South Tower - Eighth Floor  
Address

Miami, FL 33131  
City/State and Zip Code

abritell@caribjournal.com  
E-mail address: (to be used for future annual report notification)

FILED  
2013 AUG - 8 PM 12: 12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Alexander C. Britell at (917) 297-8306  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

**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. Name of the limited liability company: Caribbean Journal, LLC

2. (a) Principal office address of limited liability company: 1101 Brickell Avenue  
South Tower - Eighth Floor  
Miami, FL 33131  
**(Note: MUST BE STREET ADDRESS)**

(b) Mailing address of limited liability company: 1101 Brickell Avenue  
South Tower - Eighth Floor  
Miami, FL 33141  
**(Note: MAY BE POST OFFICE BOX)**

03/07/2011  
3. Date of filing/registration in Florida

L11000028183  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
Registered Agent: Alexander C Britell  
Registered Office Address: 5830 S.W. 57<sup>th</sup> Avenue  
Apt #238  
Miami, FL 33143

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
**NEW Registered Agent:** Alexander C. Britell  
**NEW Registered Office Address:** 1101 Brickell Avenue  
**(MUST BE FLORIDA STREET ADDRESS)** South Tower - Eighth Floor  
Miami, FL 33131

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

Peter S Britell  
Printed or typed name of signer

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

FILED  
AUG - 8 PM 12:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA