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COVER LETTER

TO: Registration Section **Division of Corporations** SMARTWAVE NETWORKS LATIN AMERICA 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: ALAN A. LIPS, CPA Name of Person GERSON PRESTON ROBINSON & CO, P.A. Firm/Company 666 71 STREET Address MIAMI BEACH, FL 33141 City/State and Zip Code AMA@GPRCO-CPA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ADI MARTINEZ ALMEIDA 868-3600 EXT 1108 Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: □ \$25 Filing Fee INHS18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

(a) C/o GERSON PRESTON ROBINSON & CO Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 666 71 STREET MIAMI BEACH, FL 33141 08/30/2011 Date of filing/registration in Florida Registered Agent and Registered Office shown on the records of the Florida Dept. of State: JOSE MAURICIO LOZANO Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 4465 SW 160 AVE #207 MIRAMAR ALAN A. LIPS, CPA	Name of the limited liability co	mpany: SMARTWA	VE NETWO	DRKS LATIN AMERICA LLC
Principal office address of limited liability company: (Note: MAY BE STREET ADDRESS) 666 71 STREET MIAMI BEACH, FL 33141 Date of filling/registration in Florida Registered Agent and Registered Office shown on the records of the Florida Dept. of State: JOSE MAURICIO LOZANO Registered Office Address 4465 SW 160 AVE #207 MIRAMAR ALAN A. LIPS, CPA Enter name of NEW Registered Agent and/or NEW Registered Office address: GERSON PRESTON ROBINSON & CO, P.A. NEW Registered Office Address: 666 71 STREET MIAMI BEACH PL 33141 et imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed the timited liability company, it is hereby confirmed that the charge or changes are made, the Florida street address of the registered office and the business office of the nix will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the charge or ganization or the operating agreement of the limited liability company. **ROBERTO S. BIASSIO FILHO Printed or typed name of signee without state is the proper and complete performance of my duties, and I am familiar with obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is revelvy allocated a chance in the registered office and the but the limited liability company in the limited libility company.	C/A GEDSON DESTO		o _(b) s	SAME
Date of filing/registration in Florida Date of filing/registration in Florida A Document number	Principal office address of (Note: MUST BE S			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Date of filing/registration in Florida A. Document number Registered Agent and Registered Office shown on the records of the Florida Dept. of State: JOSE MAURICIO LOZANO Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 4465 SW 160 AVE #207 MIRAMAR ALAN A. LIPS, CPA Enter name of NEW Registered Agent and/or NEW Registered Office address: GERSON PRESTON ROBINSON & CO, P.A. NEW Registered Office Address: 666 71 STREET MIAMI BEACH FL 33141 e limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed to thange or changes are made, the Florida street address of the registered office and the business office of the twill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change of the different of the limited liability company or as otherwise produced of the state of Florida street address of the registered office and the business office of the twill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the clowere authorized by an affirmative vote of the members of the limited liability company or as otherwise produced of a member of the limited liability company. ROBERTO S. BIASSIO FILHO panture of a member Printed or typed name of signee Printed or typed name of signee Printed or position as registered agent and agree to act in this capacity. I further agree to company is informed that the limited liability company is informed that the limited liability company is informed that the limited liability company.	MIAMI BEACH, FL 33	41		
Registered Agent and Registered Office shown on the records of the Florida Dept. of State: JOSE MAURICIO LOZANO Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 4465 SW 160 AVE #207 MIRAMAR ,FL 33027 ALAN A. LIPS, CPA Enter name of NEW Registered Agent and/or NEW Registered Office address: GERSON PRESTON ROBINSON & CO, P.A. NEW Registered Office Address: 666 71 STREET MIAMI BEACH ,FL 33141 e limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that they were authorized by an affirmative vote of the members of the limited liability company or as otherwise prunicles of organization or the operating agreement of the limited liability company or as otherwise prunicles of organization or the operating agreement of the limited liability company. ROBERTO S. BIASSIO FILHO Printed or typed name of signee representative to the proper and complete performance of my duties, and I am familiar with obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is released of the address. Hore to the proper in Chapter 605, F.S. Or, if this document is released of the address. Hore to the proper and complete performance of my duties, and I am familiar with obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is	08/30/2011		L1	100099687
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