12/28/2017

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 1104320030534 Phone : (561)694-8187 : (551)694-1639 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:__ LLC REGISTERED AGENT CHANGE 44 FELMAN PRODUCTION, LLC Certificate of Status 0 Certified Copy 02 Page Count \$25.00 Estimated Charge

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Corporate Filing Menu

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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, Fiorida 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. N	ame of the limited liability company:	ction, LLC
2. (a)	200 SOUTH BISCAYNE BLVD SUITE 5500	(b) 200 SOUTH BISCAYNE BLVD
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	MIAMI, FL 33131	SUITE 5500
		MIAMI, FL 33131
	04/23/2012	M12000002245
 (a) 	Date of filing/registration in Florida POWELL, ROBERT	4. Document number
J. (ii)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 200 SOUTH BISCAYNE BLVD SUITE 5500	
	Registered Office Address	DORESS:
	MIAMI, , FL	33131
(b)	Corporate Creations Network Inc.	5-19
	Enter name of NEW Registered Agent and/or NEW Registered	Ottlee address: 22 CO
	11380 Prosperity Farms Road #221E	
	NEW Registered Office Address:	7: 45
	Palm Beach Gardens, FL	33410
the chagent was/v	usinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the lattice of a member or authorized representative of a member.	Karen Montano, Attorney-in-Fact Printed or typed name of signee
I her provi the oil to me rolifi	ehy accept the appointment as registered agent and agistions of all statutes relative to the proper and complete hitigations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of the change. Karen Montano, Spatter of Registered Agent	ree to act in this capacity. I further agree to comply with the perform-ince of my duties, and I am familiar with and accept of for in Chapter 605, F.S. Or, if this document is being filed hereby confirm that the limited liability company has been pecial Secretary