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Special Instructions to	Filing Officer:	
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2008 NOV 24 AM II: 04 SECRETARY OF STATE

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NOV 25 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: 3R Circus LLC (Name	e of Limited Liability Company)		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for i	filing.	
Please return all correspondence concerning	g this matter to the following:		
Heather Scott (Name of Person)			
Rosenthal Rosenthal (Firm/Company)	Rasco		
Aventua, FL 33/80  (City/State and Zip Code)		2000 NOV 24 AM II: 04 SECRETARY OF STATE TALLAHASSEE.FLORIDA	and the second s
For further information concerning this mat	tter, please call:		
(Name of Person)	at ( <u>305</u> ) <u>937 ()300</u> (Area Code & Daytime Telephone N	Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		

☐ \$55 Filing Fee & Certified Copy

Tallahassee, Florida 32301

\$25 Filing Fee

Enclosed is a check for the following amount:

## , 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: 3R Circus L	LC		
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	20900 NE 30 Ave #600 Aventura, FL 33180		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	20900 NE 30 Ave. #600 Aventura, FL 33180		
12/28/07 3. Date of filing/registration in Florida	L0700127964 4. Document number		
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:		
Registered Agent:	Kerry E. Rosenthal Fsg.		
Registered Office Address:	7875 NE 1918 St. Sute 500 Aventura, FL 3818 000 5		
•	HE OV		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:			
NEW Registered Agent:	Kerry E. Kosenthan to		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	20900 NE 30 Ave 對600 Aventura FE 33180		
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 of a member or authorized representative of a member)  (Printed or typed name of signec)  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 of Registered Agent)			
Division of Computions D.O. Boy	6227 Telloharren El 22214		

**FILING FEE: \$25.00**