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THE STATE STATE STATE OF CORPORATIONS OF CORPORATIONS

J. BRYAN
DEC 11 2008
EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Dolphin Digital Media (Name of Limit	Holdings LLC red Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	hange and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	itter to the following:
William H. O'Dowd TV (Name of Person)	
Dolphin Digital Media Holdings (Firm/Company)	<u>LLC</u> 88
804 Douglas Road Suite 365 (Address)	
Coral Gables, FL 33134 (City/State and Zip Code)	· · · · · · · · · · · · · · · · · · ·
For further information concerning this matter, please	se call:
	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 amou	unt:
\$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.

2	
1. Name of the limited liability company:	rigital Media Holdings LLC
2. (a) Principal office address of limited liability compan ( <i>Note: MUST BE STREET ADDRESS</i> )	v. 804 Dovalas Boad Suite 365
(Note: MUST BE STREET ADDRESS)	Coral Gables FL 33134
(b) Mailing address of limited liability company	Pat Dander Paul Suite 365
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	804 Douglas Road, Svito 365 Coral Gables, FL 33134
THUR. MAIL DE LOST OF LICE DON	COTO: Gudles, Pla 35157
	8 EE
	R Fig.
3. Date of filing/registration in Florida	L0800 00 58370
3. Date of filing/registration in Florida	4. Document number
5 (a) Desistant Asset and Desistand Office shows on	the records of the Floride Dont of States
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Corporation Service Company is
Registered Office Address:	1201 Hays Street Talkhassee, FL 32301-2525
	Talkhassee, FL 32301-2525
(I) D. CNDWB ! A IA A !! NO	W.D. 14 1 000 1 1
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	William H. O'Dowd TV
<del></del>	
NEW Registered Office Address:	804 Douglas Road, Suite 365
(MUST BE FLORIDA STREET ADDRESS)	Coral Gables ,FL 33/34
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 stree office of the registered agent will be identical. Or, in the	et address of the registered office and the business
hereby confirmed that the change(s) was/were authorized	by an affirmative vote of the members of the limited
hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles of	of organization or the operating agreement of the
limited liability company.	
helle O'Val to	
(Signature of a member or authorized representative of a member)	_
1	
William O'Dowd IV	_
(Printed or typed name of signee)	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pram familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notifie	agree to act in this capacity. I further agree to
am familiar with and accept the obligations of my position	i as registered agent as provided for in Chapter 608,
F.S. Ur, if this document is being filed to merely reflect a confirm that the limited liability company has been notified.	cnange in the registered office address, I hereby d in writing of this change
Wille O Val &	
(Signature of Registered Agent)	

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

44.54