

Division of Corporations

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L00000005081**Florida Department of State**

Division of Corporations

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Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 922-4000

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number : 075350000353

Phone : (212) 431-5000

Fax Number : (212) 431-1441

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DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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L-5081**REGISTERED AGENT CHANGE****SOBE CREATIVE GROUP, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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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 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. The name of the limited liability company is: SOBE CREATIVE GROUP, LLC
2. The mailing address of the limited liability company is :
407 Lincoln Road, Miami Beach, FL 33139
3. Date of filing/registration in Florida May 3, 2000
4. Document number L00000005081

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Blumberg Excelsior Corporate Services, Inc.
Name
4435 Old Winter Road
Address
Orlando, FL 32811
City, State and Zip

6. The name and address of the new registered agent and/or office:

Guiseppe Collarino
Name
407 Lincoln Road
Florida street address (P.O. Box NOT acceptable)
Miami Beach FL 33139
City, State and Zip

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TALLAHASSEE, FLORIDA

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)

GIUSEPPE COLLARINO

(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 of registered agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

WMA:act/hen

FILING FEE: \$25.00

Blumberg Excelsior Corporate Services, Inc.
62 White Street
New York, NY 10013

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