L00000005743

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

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LLC REGISTERED AGENT CHANGE
VIVA.COM REALTY BROKERAGE, LLC

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August 6, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

VIVA.COM REALTY BROKERAGE, LLC
2145 HAMILTON AVENUE
SAN JOSE, CA 95125

SUBJECT: VIVA.COM REALTY BROKERAGE, LLC
REF: L00000005743

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

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Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

FAX Aud. #: H12000196993
Letter Number: 212A00020323

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VIVA.COM REALTY BROKERAGE, 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:

Wendy Grissom
Name of Person

PRIMEDIA, Inc.
Firm/Company

3585 Engineering Drive Ste. 100
Address

Norcross, GA 30092-2891
City/State and Zip Code

wgrissom@primedia.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WENDY GRISSOM at (678) 421. 3476
Name of Person 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 amount:

☐ $25 Filing Fee ☐ $55 Filing Fee & Certified Copy

INHS18 (5/08)

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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. Name of the limited liability company: VIVA.COM REALTY BROKERAGE, LLC

2. (a) Principal office address of limited liability company: 2145 Hamilton Avenue

(Note: MUST BE STREET ADDRESS) San Jose, CA, 95125

(b) Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

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5/18/2000
3. Date of filing/registration in Florida

L00000005743
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: NRAI Services, Inc.

Registered Office Address: 515 E Park Avenue
Tallahassee, FL 32301

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent: C T Corporation System

NEW Registered Office Address: 1200 South Pine Island Road
(MUST BE FLORIDA STREET ADDRESS)
Plantation, FL 33324

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

MARLON F. STARR, SVP
Printed or typed name of signee

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.

By: C T Corporation System
Terence Hardley Asst. Secretary
Signature of Registered Agent

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

INHS18 (05/08)