

LO3000001737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

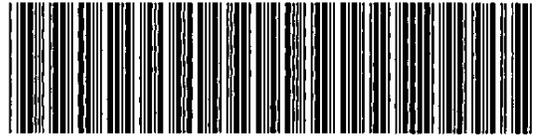
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05/01/08--01021--021 \*\*25.00

08 MAY - 1 PM 12:04  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

April 22, 2008

**VIA US REGULAR MAIL**

Florida Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

Re: **Cool Handle Hosting LLC**

Dear Sir or Madam:

On behalf of the above-referenced entity, enclosed please find the following for filing with the Florida Secretary of State:

- 1 One original (1) and one (1) copy of Change of Registered Agent/Address form;
- 2 \$25.00 to cover the required filing fee; and
- 3 A self-address, stamped envelope.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned in the enclosed envelope provided for your convenience.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (512) 480-9131

Respectfully,

REGISTERED AGENT SOLUTIONS, INC.



Thanya Gonzalez

**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: Cool Handle Hosting LLC

2. The mailing address of the limited liability company is : 20 S.W. 27th Avenue, 2nd Floor,  
Pompano Beach, FL 33069

1/15/03  
3. Date of filing/registration in Florida

L03000001737  
4. Document number

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

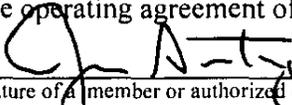
Joel S. Magolnick, Esq. c/o De La O, Marko, Magolnick & Leyton, PA  
Name  
3001 SW 3 Avenue  
Address  
Miami, FL 33129  
City, State and Zip

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

Registered Agent Solutions, Inc.  
Name  
155 Office Plaza Dr. , Suite A  
Florida street address (P.O. Box NOT acceptable)  
Tallahassee FL 32301  
City, State and Zip

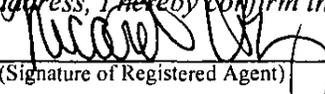
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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered 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)

Joshua Armstrong  
(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.*

  
(Signature of Registered Agent)

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