L0300002123/

(Requestor's Name)
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PICK-UP WAIT MAIL
. (Business Entity Name)
. (Submood Entity Harrie)
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COVER LETTER

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TO: Amendment Section Division of Corporations		
SUBJECT: Roud call (Name of Corp.	oration)	
DOCUMENT NUMBER: LO30000	21231	
The enclosed Statement of Change of Registered Office/A	gent and fee are submitted for filing.	
Please return all correspondence concerning this matter to	the following:	
Richard Stoll (Name of Contact	enwerck	
Broad coll (Firm/Comp	pany)	
2288 Sunset (Address	Drive	
Miami Beach (City/State and Z	FL 33140 Zfp Code) \$\igtrianglerightarrow \begin{array}{cccccccccccccccccccccccccccccccccccc	
For further information concerning this matter, please call:	SECRETALLAHA	وسناد
Richard Stollenwerck 2 (Name of Contact Person)	at (\(\frac{1}{2} \) \(\frac{1}{2} \) - \(\frac{1}{2} \) \(\f	-
Enclosed is a \$35.00 check made payable to the Department	of State.	ا نیویون ا
Mailing Address: Amendment Section	Street Address:	
Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	
	Tallahassee, FL 32301	



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 17, 2007

RICHARD STOLLENWERCK 2288 SUNSET DRIVE MIAMI BEACH, FL 33140

SUBJECT: BROADCALL LLC Ref. Number: L03000021231

SECRETARY OF STATES

We have received your document for BROADCALL LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 207A00025723

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Broad Col. (Name of Lin	nited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Richard Stollenwe (Name of Person) Broadcall LLC (Firm/Company)	LECR A
2288 Sunset Dri	AH 10: 03
Miami Reach FL (City/State and Zip Code)	_ 33140
For further information concerning this matter, Richard Stollerwerdt a (Name of Person)	
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

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.

-germ, er eern, minne state of the trade
1. The name of the limited liability company is:
2. The mailing address of the limited liability company is:
2288 Sunset Drive, Miami Beach, FL 33140
3. Date of filing/registration in Florida LO300021231 4. Document number
3. Date of filing/registration in Florida 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:
Corporate Creations Network, Inc.
11380 Prosperity Farms Road #221 E Address
Address
Palm Beach Gardent FL 33410 City, State and Zip 6. The name and address of the new registered agent and/or office: Address Address ADD ADD ADD ADD ADD ADD ADD
6. The name and address of the new registered agent and/or office:
John K. Bucklay Esq.
Name Name Name Name Name North New River Drive East St. 2000 Florida street address (P.O. Box NOT acceptable)
Address Palm Beach Gardens FL 33410 City, State and Zip 6. The name and address of the new registered agent and/or office: SEE OF SHOOT SEE OF ST. Name Name 133 North New River Drive East Florida street address (P.O. Box NOT acceptable)
Fort Lander Ricle FL 33301 City, State and Zip
City, State and Zip
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)
Richard Stollenwerck
(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, Thereby 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