· (Re	equestor's Name)	)				
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificate	es of Status				
Special Instructions to	Filing Officer:	·				
L04-9216	9	RACh.				





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05/02/06--01012--042 \*\*25.00



## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Estefan Website Entertain (Name of Lim	ment, LLC nited Liability Company)		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Offi	ice Change and fee(s) are submitted for filing.		
Please return all correspondence concerning thi	is matter to the following:		
Sandy York, Associate Counsel (Name of Person)	· 		
Estefan Website Entertainment, LLC	<u>C</u>		
420 Jefferson Avenue	<u>.                                    </u>		
(Addiess)			
Miami Beach, Florida 33139			
(City/State and Zip Code)			
For further information concerning this matter,	please call:		
Sandy York, Associate Counsel a	ıt ( <u>305</u> ) <u>695-7045</u>		
(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 a	amount:		
<b>✓</b> \$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.

1. The name of the limited	liability company is: Estefar	n Website Entertainment, LLC			·
2. The mailing address of the	he limited liability company	is : 420 Jefferson Avenue			·
Miami Beach, Florida 331	39				
12/21/04	·	L04000092169			
3. Date of filing/registration in Florida		4. Document number			
Florida Department of Sta	ate:	fice address as shown on the	records o	of the	
<u></u>	3 & C Corporate Servic	es, Inc.			
_	Name				
<u></u>		l Floor, 2 S. Biscayne Blv	d		
	Address	1	ZΩ	об мау	
Miami, Florida 33131			<u>Σ</u> Ω	7	
City, State and Zip					
6. The name and address of the new registered agent and/or office:		/or office:	SSE C	-2 F	
Intrastate Registered Agent Corporation		ent Corporation	77	£	
_	Name		윤물	••	1
7	01 Brickell Avenue, Suite	3000	모	25	
	Florida street address (P.O. E	Box NOT acceptable)			
		33131			
	City, State and	Zip			
confirmed that after the char	nge or changes are made, the	e laws of the State of Florida Florida street address of the	registere	d offic	e

on 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)

Emilio Estefan, Jr.

 $V_{ij}$ 

(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 statules 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