105@00aa637

2005 MAY 31	P 2: 34
SECRETARY (Requestor's Nama)	OF STATE
(Requestor's Nama ALL ATTASSE	
(Address)	
(Address)	
	İ
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
1	
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300055120223

05/27/05---01053---005 **67.50

' STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of s liability company submits the f agent, or both, in the State of Fl	sections 608.416 ollowing statemen orida.	or 608.508, Fla nt in order to ch	orida Statutes, the istance its registered	ndersigned limited office or registered
1. The name of the limited liabi	lity company is:	TV27, LLC	2005 MAY 3 I	P 2: 511
2. The mailing address of the lin	mited liability cor	npany is :	SECRETARY	. 2.04
3505 OCEAN DRIVE, VERO	BEACH, FL 32	2963	SECRETARY TALLAHASSE	E, FLORIDA .
03/07/05		LO	5000022637	
3. Date of filing/registration in l	Florida	4. I	Occument number	
5. The name of the registered ag Florida Department of State:	_	ered office addre		records of the
	201 ALHAMBRA	Name A CIRCLE, STE	601	
	CORAL GABLE	Address S, FLORIDA 3 State and Zip	3134	
6. The name and address of the	new registered ag	ent and/or office	:	
	JOHN E. T	AYLOR, JR.		
	3505 OCE	lame AN DRIVE		
Flori	ida street address	(P.O. Box NOT	acceptable)	
VER	O BEACH	_{FL} 32963		
	City, St	ate and Zip		
If the limited liability company is confirmed that after the change of and the business office of the repliability company, it is hereby to the members of the limited liability coefficient of the hereby countries and the operating agreement of the hereby confirmation.	or changes are ma extered agent will offirmed that the lity company or a united liability co	ide, the Florida s l be identical. O change(s) was/w s otherwise prov mpany.	treet address of the r r, in the case of a Flor ere authorized by an	registered office orida limited affirmative vote of
Signature of a member or authorized repr	esentative of a member	·)		
JOHN E. TAYLOR, JR. (Printed or typed jugge of signee)				
I hereby accept the appointment comply with the provisions of his and I am familiar with and acce Chapter 608 (F.S. Of) if this do address, I hereby cunfirm that the (Signature of Ribbacred Agent)	t as registered ag I statules relative pt the obligations cument is being fi ne limited liability	ent and agrec to to the proper an of my position o led to merely re company has b	act in this capacity. Id complete performa Is registered agent a Ilect a change in the een notified in writin	I further agree to ance of my duties, s provided for in registered office ng of this change.

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

INHS18(10/99)

FILING FEE: \$25.00