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W5-106304

COVER LETTER

Division of Corporation	ons				
SUBJECT: WOW Pro	operties LLC (Name of Limite	d Liability Company)			
Dear Sir or Madam:					
The enclosed Registered Age	nt/Registered Office	Change and fee(s) are submitted fo	r filing.		
Please return all corresponder	ice concerning this m	natter to the following:			
Otto A. Gonzalez					
(Name of	reison)		1	m.)	
HOW Programmed and			JAL SE(2006	
WOW Properties(Firm/Con	npany)		AR	DEC	g:17
			TAR ASS	2006 DEC 26	1
PO Box 832468			EE.		E. C. Con
(Addre	is)		FLO	4M 10: 46	3,
			PATE ASE	94:	
Miami, FL 33283 (City/State an				-	
(City/State air	12.1p Code)				
For further information conce	rning this matter lnle	ase call:			
To further information conce	ming this matter, pre-	asc can.			
Otto Gonzalez Jr	at (305) 271-4446			
(Name of Perso		(Area Code & Daytime Tele	ephone N	lumber)	
STREET/COURIER A	DDRESS:	MAILING ADDRESS:			
Registration Section Division of Corporations	•	Registration Section Division of Corporations			
Clifton Building		P.O. Box 6327			
2661 Executive Center C Tallahassee, Florida 323		Tallahassee, Florida 32314			
Enclosed is a check for	or the following amo	ount:			
x \$25 Filing Fee		\$55 Filing Fee & Certified Co	ру		

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: <u>WOW Properties LLC</u> .				
2. The mailing address of the limited liability company is: PO Box 832468				
Miami, FL 33283-2468				
November 8, 2005 L05000108306				
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:				
Luis Soto Name				
9360 Sunset Drive Suite 245 Address				
Miami, FL 33173				
City, State and Zip				
6. The name and address of the new registered agent and/or office:				
Otto A. Gonzalez Jr. CC				
Otto A. Gonzalez Jr. Name Name Name Name Name Name Name				
9360 Sunset Drive Suite 245 SP 2				
Florida street address (P.O. Box NOT acceptable)				
Miami, FL 33173-2/5				
Florida street address (P.O. Box NOT acceptable) Miami, FL 33173-275 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)				
Luis J. Soto				
(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. On, if this document is being filed to merely reflect a change in the registered office address, the febylgorfirm that the limited liability company has been notified in writing of this change. (Signalur Accessors				
0++0 60 Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314				
FILING FEE: \$25.00				