Division of Corporations

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

Account Name

: CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

: (561)694-8107

Fax Number

: (561)694-1639

\*Enterche email address for this business entity to be used for future cannual report mailings. Enter only one email address please.\*\*

Zmail Address:

## LLC REGISTERED AGENT CHANGE SOL HOLDINGS, LLC

The contract of the following property is the contract of the	APP ASSESSMENT CONTRACTOR
Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	ame of the limited liability company: SOL HOLDIN	NGS,	LLC		
2. (a)	555 N.E. 185TH, STREET		(b) 555 N.E. 185TH. STREET		
()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	<del></del>	(0)	Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)	
	SUITE 201		SUITE	201	
	MIAMI, FL 33179		MIAMI,	FL 33179	
	01/05/2006		L060000	01451	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	M&M RA Services, LLC				
** (**)	Registered Agent and Registered Office shows on the records of 3001 SW Third Avenue  Registered Office Address MUST BE FLORIDA STREET.			—	
		3312	·	_	
	, FI				ALL
<b>(b)</b>	Corporate Creations Network Inc.			- 5t	<u> </u>
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office	address:		<u>.</u> ∧S
	11380 Prosperity Farms Road #221E				
	NEW Registered Office Address:				TALLAHASSEE, FLORIDA
	Palm Beach Gardens , FI	3341	0	<u></u>	1
If the the ch agent was/w the af	limited liability company is not organized under the lar ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- are authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	ws of the re ability of the l	he State of Figistered office company, it imited liability do liability con	lorida, it is hereby confirmed that at and the business office of the reg- is hereby confirmed that the change ty company or as otherwise provide mpany.	ter istered (s) d in
				an, Attorney-in-Fact	· 
- 1	iture of a member of authorized representative of a member			Printed or typed name of signee	
I here provis the ob- to men	by accept the appointment as registered agent and aging in sure and complete to the proper and complete ligations of the position as registered agent as provide ely reflection change in the registered office address, I	ree to a perfoi ed for i hereby	act in this cap rmance of my n Chapter 60 v confirm thai	pacity. I further agree to comply wi duties, and I am familiar with and 5, F.S. Or, if this document is being the limited liability company has b	th the accept g filed een
noujie	d to writing of this change. Kristine Duran, Spec				
	Division of Corporations P.O. 1 FILING F			ssee, FL 32314	