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COVER LETTER

TO: Registration Section Division of Corporations		
	nagement Group, LLC	
Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Keri Lynda Horvat, Esg.		
Name of Person		
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Alvarez Carbonell Feltman Jimenez & Go.	Mez PL SS	
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	براي المراجعة	
2100 Ponce de Leon Blvd. Ste. 800	<u> </u>	
Address		
	**	
Coral Gables, FL 33134		
City/State and Zip Code		
Ihorvat@acglegal.com E-mail address: (to be used for future annual report notifica	ition)	
For further information concerning this matter, pl	ease call:	
Keri Lynda Horvat at (
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

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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. Name of the limited liability company:	Royal Management Group, LLC
2. (a) Principal office address of limited liability co	mpany: 747 4th Street, #200
(Note: MUST BE STREET ADDRESS)	Miami Beach, FL 33139
(b) Mailing address of limited liability company:	747 4th Street, #200
(Note: MAY BE POST OFFICE BOX)	Miami Beach, FL 33139
01/26/2006	L06000007502
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	Mark a
Registered Agent:	Keri Lynda Horvat
Registered Office Address:	4848 SW 74 Court #200
<u>.</u>	Miami, FL 33155
NEW Registered Agent: NEW Registered Office Address:	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2100 Ponce de Leon Blvd. #800
	Coral Gables ,FL33134
If the limited liability company is not organized under confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the chan of the mer bers of the limited liability company or as or the operating agreement of the limited liability com Signature of member or authorized representative of a member when the limited or typed name of signee	the Florida street address of the registered office identical. Or, in the case of a Florida limited use(s) was/were authorized by an affirmative vote.
I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the and an lamiliar with and accept the obligations of many complete to the control of the complete to the complete to the complete to the complete the complete to the complete	and agree to act in this capacity. I further agree to the proper and complete performance of my duties, the provided for in the provided for in the property reflect a change in the registered office than has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (05/08)