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COVER LETTER

Division of Corporations	
SUBJECT: Q-BANG COMMUNICATIONS (Name of Limit	, LLC ted Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
	•
Pablo A. Pareja Vazquez	
(Name of Person)	
Q-BANG COMMUNICATIONS, LLC	
(Firm/Company)	2001 2001
4595 Palm Beach Blvd. Suite 3	SECRETARE AUG 2
· (Address)	
Fort Myers, FL 33905	OF STATE REPORATION
(City/State and Zip Code)	*: 52
For further information concerning this matter, p	lease call:
Pablo A. Pareja Vazquez	(239) 690-1529
(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 ar	mount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

TO: Registration Section

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: Q-BANG COMMUNICATIONS, LLC				
2. The mailing address of the limited liability company is : 4595 Palm Beach Blvd. Suite 3				
Fort Myers, FL 33905				
August 18th, 2006	L06000015407			
3. Date of filing/registration in Florida 4. Document number				
5. The name of the registered agent and the registered office Florida Department of State:	address as shown on the re-	cords	of the	
BUSINESS FILINGS INCORP	ORATED			
Name				
1203 GOVERNORS SQUARE B	LVD., SUITE 101			
Address			(·	
TALLAHASSEE FL 32301-2960 City, State and Zi	in	200	DIVI S.	
•	•	2006 AUG 2 I	SIO S	
6. The name and address of the new registered agent and/or of	office:	2		
Pablo A. Pareja-Vazquez			5,4 1,30 1,30 1,30 1,30 1,30 1,30 1,30 1,30	
Name		≥	32년	
4595 Palm Beach Blvd. Suite 3		=	STA	
Florida street address (P.O. Box NOT acceptable)		AM 11: 52	TE TE	
Fort Myers FL 3390	5	~	· <u>></u>	
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)				
Rayma Vazquez (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 600, F,S. Or, if this document is being filed to merely reflect a change in the registered office address. I have by confirm that the limited liability company has been notified in writing of this change.				

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

(Signature of Registered Agent)