

Oct. 19 2006 9:30AM

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Florida Department of State  
Division of Corporations  
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DIVISION OF CORPORATIONS

Division of Corporations  
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Account Name : ZIGLAW  
Account Number : 120060000099  
Phone : (305) 604-9944  
Fax Number : (305) 604-9945

REGISTERED AGENT CHANGE

PIRATES MUTINY, LLC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
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| Page Count            | 01      |
| Estimated Charge      | \$35.00 |

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Pirates Mutiny, LLC  
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jennifer Rodriguez

(Name of Person)

ZigLaw

(Firm/Company)

927 Lincoln Road, Suite 200

(Address)

Miami Beach, Florida 33139

(City/State and Zip Code)

For further information concerning this matter, please call:

Jennifer Rodriguez

(Name of Person)

at (305) 604-9944

(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 amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

INHS18 (8/05)

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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. The name of the limited liability company is: Pirates Mutiny, LLC
2. The mailing address of the limited liability company is: Fiscal No. A07161813, Cal. Joaquín Borolla, 17,  
Baños, Magelluf, Mallorca, Baleares Spain 07181

February 23, 2006

L060000 19961

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:

Corpdirect Agents, Inc.

Name

515 E. Park Ave.

Address

Tallahassee, Florida 32301

City, State and Zip

6. The name and address of the new registered agent and/or office:

Leslie Jose Zigel

Name

927 Lincoln Road, Suite 200

Florida street address (P.O. Box NOT acceptable)

Miami Beach

FL 33139

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]  
(Signature of a member or authorized representative of a member)

Andrew Clemence CEO  
(Printed or typed name of signor)

*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. Or, if this document is being filed to hereby reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

[Signature]  
(Signature of Registered Agent)

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

FILING FEE: \$25.00

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