

L06000105191

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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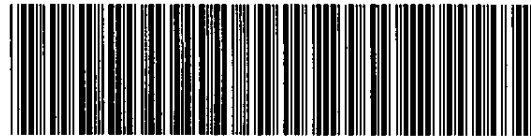
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATION
10 NOV -8 PM 2:34

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hola Images, 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:

Lorena Arnold
(Name of Person)

Hola Images, LLC
(Firm/Company)

PO BOX 720037
(Address)

Miami, FL 33172
(City/State and Zip Code)

For further information concerning this matter, please call:

Zehra Abdi at (212) 974-7474
(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 amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 5, 2010

LORENA ARNOLD
PO BOX 720037
MIAMI, FL 33172

SUBJECT: HOLA IMAGES LLC
Ref. Number: L06000105191

We have received your document for HOLA IMAGES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 210A00023534

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: Hola Images, LLC

2. (a) Principal office address of limited liability company: 1000 Brickwell Avenue
Suite 715
Miami, FL 33131

(Note: **MUST BE STREET ADDRESS**)

(b) Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

PO BOX 720037
Miami, FL 33172

10/30/2006

3. Date of filing/registration in Florida

L06000105191

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Corporation Service Company

Registered Office Address:

1201 Hays Street
Tallahassee, FL 32301

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

~~Hola Images, LLC~~ Lorena Arnold

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

~~1000 Brickwell Avenue~~
1000 BRICKELL Ave, Suite 715
Miami, FL 33172 33171

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)

Zehra Abdi, Attorney for Lorena Arnold, Managing member of Hola Images, LLC
(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. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By: [Signature]

(Signature of Registered Agent)

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

FILING FEE: \$25.00