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SECRETARY OF STATE
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COVER LETTER

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TO: Registration Section Division of Corporations		
SUBJECT: Medallion M (Name of Limited	langement Gro	upLLC
Dear Sir or Madam:	·	
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted f	or filing.
Please return all correspondence concerning this ma	atter to the following:	
Jennifer Miller (Name of Person)		07 SE TAL
Medallion Management (Firm/Company)	Group LLC	OCT 10 CRETARY LAHASSEI
920 SW 2nd PL (Address)		PM 3: L2 OF STATE E. FLORIDA
Pompano Beach, 1-L (City/State and Zip Code)	33069	
For further information concerning this matter, plea	ase call:	
Sennifer Miller at (at (at (954) 861-2472 (Area Code & Daytime Te	elephone 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 amo	ount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

INHS18 (8/05)

'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: Medalton Maragement Group Lt
2. The mailing address of the limited liability company is: 920 5w 2 PL.
Pompano Beach, 4L 83069
11/2006 LOGODO107905
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:
Tami Gayikian, FSQ. 200 Southeast 6th St.
Suite 102 Address
Ft. Lauderdale, FL 33301 City, State and Zip
6. The name and address of the new registered agent and/or office:
Jennifer Miller = = = = = = = = = = = = = = = = = = =
920 SW 2nd PL BEST 5
Florida street address (P.O. Box NOT acceptable)
Pompano Boach FL 33069 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.
Lember Mell
(Signature of a member or authorized representative of a member)
(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, Thereby confirm that the limited liability company has been notified in writing of this change.
(Signature of Registered Agent) Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25:00