

MAY-21-2008

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KRAMER GREEN

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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : KRAMER, GREEN, ZUCKERMAN, GREENE & BUCHSBAUM, P.A.  
Account Number : 073707002173  
Phone : (954) 966-2112  
Fax Number : (954) 981-1605

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REGISTERED AGENT CHANGE

YEAR OF THE GOLDEN PIG LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$87.50

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## COVER LETTER

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**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Year of the Golden Pig, 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:

Robert M. Kramer, Esq.  
(Name of Person)

Kramer, Green, Zuckerman, Greene & Buchsbaum, P.A.  
(Firm/Company)

4000 Hollywood Boulevard, Suite 485-South  
(Address)

Hollywood, FL 33021  
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert M. Kramer at ( 954 ) 988-2112  
(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

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR LIMITED LIABILITY COMPANY (H08000134748 3)))**

*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: Year of the Golden Pig, LLC

2. (a) Principal office address of limited liability company: 400 Alton Road, PH 7  
☒ (Note: **MUST BE STREET ADDRESS**) Miami Beach, FL 33139

(b) Mailing address of limited liability company: 400 Alton Road, PH 7  
☒ (Note: **MAY BE POST OFFICE BOX**) Miami Beach, FL 33139

02/22/2007 L07000020340  
 3. Date of filing/registration in Florida 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State  
 Registered Agent: Key Registered Agents, Inc.  
 Registered Office Address: 520 Brickell Key Drive  
Suite D-303  
Miami, FL 33133

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

**NEW Registered Agent:** Robert M. Kramer, Esq.  
**NEW Registered Office Address:** 4000 Hollywood Boulevard  
**(MUST BE FLORIDA STREET ADDRESS)** Suite 485-South  
Hollywood, FL 33021

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.

*D.P.*   
 (Signature of a member or authorized representative of a member)

Dennis Palino  
 (Printed or typed name of signer)

*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.*

  
 (Signature of Registered Agent)

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

INHS18 (03/08)

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