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COVER LETTER

Division of Corporations			
SUBJECT: Koji Enterprise Name of Limite	S, LLC d 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 n	natter to the following:		
Kirk Smythe Name of Person			
KOji ENHOPTISS, LLC Firm/Company			
13480 SW 131 AVENUE			
Miami, FL 33186 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)	<u> </u>		
For further information concerning this matter, please call:			
KICK SMYTHE at (at (786) 293-1016 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		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

liability company submits the following statement in order agent, or both, in the State of Florida.	18, Florida Slatutes, the undersigned limited r to change its registered office or registered		
1. Name of the limited liability company:	Merprises, LLC		
2. (a) Principal office address of limited liability company	: 13480 SW 131 Avenue		
(Note: MUST BE STREET ADDRESS)	Miami, FCE8366		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	13480 SW 131 AVE/FROM MIAMI, FL 33186.		
03/02/2007	L07000003772 55		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:		
Registered Agent:	Kristian B. Grant		
Registered Office Address:	12891 SW 198 Terrace Miami, FL 33187-7 US		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			
NEW Registered Agent:	<u>Kirk Smythe</u>		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	13480 SW 131 Avenue		
	Miam 1 ,FL 33186		
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			
Printed or typed name of signee	-		
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the providing and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.		

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