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C. LEWIS

MAY 1 9 2009

EXAMINER

COVER LETTER			
TO: Registration Section Division of Corporations	÷ **		
SUBJECT: COSA HOLDINGS LLC  Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.		
Please return all correspondence concerning th	-		
Trease retain an correspondence concerning a	in matter to the following.		
	•		
JASON SAUNDERS Name of Person			
COSA HOLDINGS LLC Firm/Company			
1680 CORAL WAY, SUITE 101	<u> </u>		
Audiess	•		
MIAMI, FL 33145	<del></del>		
City/State and Zip Code			
L mail address ASON@KIRALYSA COM			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
JASON SAUNDERS Name of Person	at ( 281 ) 620-5004  Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations P.O. Box 6327		
Clifton Building 2661 Executive Center Circle	Tallahassee, Florida 32314		
Tallahassee, Florida 32301			
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

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.

Name of the limited liability company:	COSA HOLDINGS LLC			
2. (a) Principal office address of limited liability company	y: 1680 CORAL WAY, SUITE 101			
(Note: MUST BE STREET ADDRESS)	MIAMI, FL 33145			
(b) Mailing address of limited liability company:	1680 CORAL WAY, SUITE 101			
(Note: MAY BE POST OFFICE BOX)	MIAMI, FL 33145			
3. Date of filing/registration in Florida	L0700004 AREA TO LO700004 AREA TO LO7000004 AREA TO LO70000004 AREA TO LO70000004 AREA TO LO700000004 AREA TO LO7000000004 AREA TO LO700000004 AREA TO LO70000000			
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
Registered Agent:	JASON SAUNDERS			
Registered Office Address:	325 SOUTH BISCAYNE BLVD STE 1423 MIAMI, FL 33131			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	W Registered Office address:  JASON SAUNDERS			
NEW Registered Office Address:	1680 CORAL WAY, SUITE 101			
(MÜST BE FLORIDA STREET ADDRESS)	MIAMI ,FL33145			
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fland the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company  Signature of a member or authorized representative of a member  IASON SAUNDERS  Printed or typed name of signee  I hereby accept the appointment as registered agent and a	lorida street address of the representation or, in the case of a Florida limited was/were authorized by an effirmative volp wise provided in the articles of organization of the case of a Florida limited was/were authorized by an effirmative volp wise provided in the articles of organization of the case of a Florida limited was/were authorized by an efficient was well as the case of a Florida limited was/were authorized by an efficient was well as the case of a Florida limited was/were authorized by an efficient was well as the case of a Florida limited was/were authorized by an efficient was well as the case of a Florida limited was were authorized by an efficient was well as the case of a Florida limited was were authorized by an efficient was well as the case of a Florida limited was well as the case of a Florida l			
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the province and I am familiar with and accept the obligations of my post Chapter 608, F.S. On, if this document is being filed to me address, I hereby confirm that the limited liability company	pree to do in this capacity. I further agree to be per and complete performance of my duties, sition as registered agent as provided for in rely 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				