Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:			至点
	Division of Cor	rporations	>
	Fax Number	: (850)617-6383	<i>∽</i>
		, ,	- free
From:			
	Account Name	: CORPORATE CREATIONS I	nternational ii
	Account Number		
	Phone	: (561)694-8107	2 2
	Fax Number	: (561)694-1639	0 k

LLC REGISTERED AGENT CHANGE 1105 OCEAN CII LLC

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Electronic Filing Menu

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

1. The name of the limited liability company is: 1105 O	ecan CII LLC
2. (a) Principal office address of the limited liability comapny:	c/o 701 Brickell Avenue
(Note: MUST BE STREET ADDRESS)	Sulte 3300
	Miami FL 33131
(b) Mailing address of limited liability company:	c/o 701 Brickell Avenue
(Note: MAY BE POST OFFICE BOX)	Snite 3300
	Miami FL 33131
12/18/2007	L07000125415
3. Date of filing/registration in Florida	4. Document number
5.(a) Registered Agent and Registered Office shown of	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 <u>NEW Registered Agent</u> and/or <u>NEW Re</u>	
NEW Registered Agent:	Worldwide Management LLC COrporate Creations Network, In
NEW Registered Office Address:	11380 Prosperity Farms Road #221E
(MUST BE FLORIDA STREET ADDRESS)	Palm Beach Gardens FL 33410
or changes are made, the Florida street address of the registered	it is hereby confirmed that the change(s) was/were authorized by
by Caitlin Lazarus as attorney-in-fact	•
(Printed or Typed name of signee)	
of all statutes relative to the proper and complete performance	o act in this capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the obligations of
in the registered liftice address, I hereby confirm that the limited	F.S. Or, if this document is being filed to merely reflect a change I liability company has been notified in writing of this change.
in the registered office address, I hereby confirm that the limited (Signature of Registered Agent) Division of Corporations, P.O. B	F.S. Or, if this document is being filed to merely reflect a change I liability company has been notified in writing of this change.
(Signature of Regiltered Agent) Division of Corporations, P.O. B 1NHS18(10/99)	F.S. Or, if this document is being filed to merely reflect a change I liability company has been notified in writing of this change.
(Signature of Regitured Agent) Division of Corporations, P.O. B INHS18(10/99) Corporate Creations International Inc.	F.S. Or, if this document is being filed to merely reflect a change I liability company has been notified in writing of this change.
(Signature of Regiltered Agent) Division of Corporations, P.O. B 1NHS18(10/99)	F.S. Or, if this document is being filed to merely reflect a change I liability company has been notified in writing of this change. cial Secretary