L08000028631

(Requestor's Name) (Address) (Address)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
- (Document Number)		
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08/25/08--01016--031 **



COVER LETTER

TO:	Registration Section Division of Corporations	
SUB	JECT: Media Money & More L (Name	e of Limited Liability Company)
Dear	Sir or Madam:	•
The e	enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Pleas	e return all correspondence concernin	g this matter to the following:
<u>Moshe</u>	Name of Person)	·
<u>Media</u>	Money & More LLC (Firm/Company)	
1800	NE 114th Street Suite A (Address)	
<u>North</u>	Miami Fla 33181 (City/State and Zip Code)	
For f	urther information concerning this ma	tter, please call:
Mosh	Name of Person)	at (305) 785-0433 (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 follow	ing 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.

1. The name of the limited liability company i	s: MEDIA MONEY & MORE, LLC
2. The mailing address of the limited liability	company is: 1800 Northeast 114th Street
Suite A; North Miami, Florida 33181	·
March 19, 2008	L08000028631
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the reg Florida Department of State:	gistered office address as shown on the records of the
Henry Bonis	
1800 Northeast	Name 114th Street Suite A
	Address Address
North Miami, Flo	
·	
6. The name and address of the new registered	
Moshe Zur	
	Name Paris
1800 Northeast 1	114th Street Suite A
Florida street addre	ess (P.O. Box NOT acceptable)
North Miami,	FL 33181
City,	, State and Zip
confirmed that after the change or changes are and the business office of the registered agent liability company, it is hereby confirmed that t	in 6/26/00
Henry S. Bonis	
(Printed or typed name of signee)	
I hereby accept the appointment as registered comply with the provisions of all statutes related and I am familiar with and accept the obligation Chapter 608, F.S. Or, if this document is being address, I hereby confirm that the limited liabi	agent and agree to act in this capacity. I further agree to ive to the proper and complete performance of my duties, ons of my position as registered agent as provided for in g filed to merely reflect a change in the registered office lity company has been notified in writing of this change.

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

(Signature of Registered Agent)