| (Requestor's Name) | | | | |
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| (toquests o turne, | | | | |
| (Address) | | | | |
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| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| (criproduct_printed a) | | | | |
| PICK-UP WAIT MAIL | | | | |
| . : | | | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only

G. MCLEOD

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EXAMINER



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COVER LETTER

| TO: | Registration Section Division of Corporations | | | |
|---|---|---|--|--|
| | Division of Corporations | | | |
| SUBJECT: Phyl | | isia Music Group L.L.C. | | |
| | Name of | Limited Liability Company | | |
| Dear S | Sir or Madam: | | | |
| The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. | | | | |
| Please | return all correspondence concerning | g this matter to the following: | | |
| | Jesse M. Keenan, Esquir | e | | |
| | Name of Person | | | |
| Adorno & Yoss, LLP. | | | | |
| | Firm/Company | | | |
| | 2525 Ponce De Leon Blvd., Su Address | ite 400 | | |
| | Coral Gables, Florida 3313 City/State and Zip Code | 34 | | |
| | jkeenan@adorno.com mail address: (to be used for future annual report | notification) | | |
| For fu | rther information concerning this mat | ter, please call: | | |
| <u> </u> | Jesse M. Keenan, Esquire | at (305) 460-1127 | | |
| | Name of Person | Area Code & Daytime Telephone Number | | |
| | STREET/COURIER ADDRESS: | MAILING ADDRESS: | | |
| | Registration Section | Registration Section | | |
| | Division of Corporations | Division of Corporations | | |
| | Clifton Building 2661 Executive Center Circle | P.O. Box 6327 Tallahassee, Florida 32314 | | |
| | Tallahassee, Florida 32301 | Tananassee, Florida 32314 | | |
| | Enclosed is a check for the followi | ng 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. Name of the limited liability company: P | ame of the limited liability company: Phyllisia Music Group L.L.C. | | | |
|--|---|--|--|--|
| 2. (a) Principal office address of limited liability company | y: 2525 Ponce De Leon Blvd. | | | |
| (Note: MUST BE STREET ADDRESS) | Suite 400 Coral Gables, FL. 33134 | | | |
| (b) Mailing address of limited liability company: | 2525 Ponce De Leon Blvd. | | | |
| (Note: MAY BE POST OFFICE BOX) | Suite 400 Coral Gables, FL. 33134 | | | |
| 06-11-2008 | L08000057637 | | | |
| 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: | Jesse M. Keenan | | | |
| Registered Office Address: | 3250 Mary Street, Suite 307 Miami, Florida 33139 | | | |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>NEW Registered Agent:</u> Jesse M. Keenan, Esquire | | | | |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | 2525 Ponce De Leon Blvd., Suite 400 Coral Gables ,FL33134 | | | |
| If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability 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 Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my porture to the provisions of the company of the provisions of the limited liability company of the provisions o | rical. Or, in the case of a Florida limited with the case of a Florida limited with the way were authorized by an affirmative vote wise provided in the articles of organization. | | | |

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

Signature of Registered Agent