## L08000062536

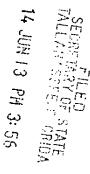
(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
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LLC RAP RO Change

JUN 2 5 2014 T. CARTER

## **COVER LETTER**

TO: Registration Section

Division of Corporations								
SUBJECT: SUBJECT:	SDE Media LLC							
	Name of Limited 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 matter to the following:								
Santiago D. Echemendia								
Name of Person								
Shutts & Bowen LLP								
Firm/Company	<del></del>							
1500 Miami Center, 201 South Biscayne Boulevard								
Address								
Miami, Florida 33131								
City/State and Zip Code								
sechemendia@shutts.com								
E-mail address: (to be used for future annual rep	ort notification)							
For further information concerning this matter, please	call:							
Santiago D. Echemendia	342-1783							
Name of Person	Area Code & Daytime To	elephone 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 C	ору						
INHS18 (2/14)								

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Na	ume of the limited liability company: SDE Media I	LLC			,		
2.	(a)	1500 Miami Center	(	b)	1500 Mi	iami Center	·	
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(	0)	N	Mailing address of limited line (Note: MAY BE POST 6	-	
		201 South Biscayne Boulevard			201 Sou	ith Biscayne Boule	vard	
		Miami, Florida 33131			Miami, F	Florida 33131	· 	
		6/25/14		L	.080000	62536		
3.		Date of filing/registration in Florida	<b>-</b> 4.			Document number		
5.	(a)	Santiago D. Echemendia						
٥.	(4)	Registered Agent and Registered Office shown on the records of	f the Florid	a I	Dept. of State	- e:		
		1441 Brickell Avenue						
		Registered Office Address (MUST BE FLORIDA STREET	ADDRES.	<u>s)</u>		-		
		15th Floor						-4
		Miami , Fi	33131			-	14 JUN	SECR
	(b)	Santiago D. Echemendia					<u>=</u>	
	(-)	Enter name of NEW Registered Agent and/or NEW Registered	d Office ac	idr	ess:	-	P	
		1500 Miami Center				ယ ဟ	STAI	
		NEW Registered Office Address:	_			•	\$	<u>5</u> m
		201 South Biscayne Boulevard						
		Miami, Florida , FI	_33131					
the age was the	cha nt w s/we arti	mited liability company is not organized under the la nge or changes are made, the Florida street address o vill be identical. Or, in the case of a Florida limited li- are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the regi iability co of the lind limited	iste om nit lia	ered office apany, it is ed liability bility com	e and the business offices hereby confirmed that y company or as otherwipany.  Echemendia	ce of the t the cha vise pro	registered
S	gnat	ure of a member or authorized representative of a member			·	Printed or typed name of s	ignee	,
pro the to n	visio obli nere	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this change.	ree to ac e perform ed for in hereby c	t in iar Ch	n this capa ace of my a apter 605 firm that i	acity. I further agree t duties, and I am famili , F.S. Or, if this docu the limited liability co	o compl ar with nent is l npany h	y with the and accept peing filed as been
Sig	natur	e of Registered Agent						