

DEC-7-2009

10:00A FROM: AIA REGISTERED AGENT INC. (561) 202-8082

NO: 187

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Florida Department of State
Division of Corporations
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Account Name : AIA REGISTERED AGENT INC.
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**REGISTERED AGENT CHANGE
BERMUDABUYERSGROUP, LLC**

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T. HAMPTON

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EXAMINER

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

Pursuant to the provisions of sections 608.416 or 608.308, 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: BERMUDABUYERSGROUP, LLC

2. (a) Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)69 NORTH SHORE ROAD BOXCR233
HAMILTON PARISH BERMUDA CR01

(b) Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)69 NORTH SHORE ROAD BOXCR233
HAMILTON PARISH BERMUDA CR0112/02/2008L08000110510

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:

A1A REGISTERED AGENT INC.

Registered Office Address:

5647 110TH AVENUE NORTH
ROYAL PALM BEACH, FL 33411(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:NEW Registered Agent:TM REGISTERED AGENT INC.NEW Registered Office Address:5647 110TH AVENUE NORTH(MUST BE FLORIDA STREET ADDRESS)ROYAL PALM BEACH, FL 33411

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of member or authorized representative of a member

JAMIE L PARENT

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Tina Maki TINA MAKI - PRES. 12/7/09

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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