## L09000082616

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SECRETARY OF STATE ON OF CORPORATIONS

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Primedia Mari	Keting, LLC f Limited Crability 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:			
Carlos Diez Name of Person			
Primedia Marketing, 1	LLC		
2645 Executive PArk	Drive # 154		
Weston Fl 33331 City State and Zip Code			
INFO ATILIA INFO @TrilliA E-mail address: (to be used for future annual repor	ANT. COM i notification)		
For further information concerning this matter, please call:			
Carlos Diez Name of Person	at (186 ) 362 9327  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 following 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: TriMediA	Marketing, LLC
2. (a) Principal office address of limited liability compar	ny: 6460 SW 129 P1 # 18056
(Note: MUST BE STREET ADDRESS)	Miami, F1 33183
(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	646D SW 129 PH 186666 Miami, Fl 33183
8-26-2009 3. Date of filing/registration in Florida	LD9000082616 ≥ 2000 4. Document number
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida Dept. of State
Registered Agent:	Carlos Diez
Registered Office Address:	6460 SW 129 PI# 18056 MIAMI, FI 33183
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u>	EW Registered Office address:
NEW Registered Agent:	Carlos Diez
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2645 Executive Park Drive Suite 154 Weston FL33331
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be identiability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company.	Florida street address of the registered office ntical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote erwise provided in the articles of organization

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 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.

Signature of Registered Agent

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