Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Phone

: (561)694-8107

Fax Number

: (561)694-1639

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

| Enail | Address: | | |
|-------|----------|--|--|
| | | | |

LLC REGISTERED AGENT CHANGE BRILLA IPCO, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$25.00 |

K. SALY EXAMINER

FEB 1 1 2014

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

| 1. The name of the limited liability company is: Bri | lla IPCO, LLC | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| 2. (a) Principal office address of the limited liability comaps | y: 120 NE 27TH STREET SC | | |
| (Note: MUST BE STREET ADDRESS) | SUITE 500 MIAMI FL 33137 | | |
| (b) Mailing address of limited liability company: | 120 NE 27TH STREET PP | | |
| (Note: MAY BE POST OFFICE BOX) | SUITE 500 MIAMI FL 33137 | | |
| 9/22/2009 | 1.09000091469 | | |
| 3. Date of filing/registration in Florida | 4. Document number | | |
| 5.(a) Registered Agent and Registered Office show | vn on the records of the Florida Dept. of State: | | |
| Registered Agent: | NRAI SERVICES, INC. | | |
| Registered Office Address: | 1200 South Pine Island Road | | |
| • | Plantation, FL 33324p | | |
| (h) Enter name of <u>NEW Resistered Agent</u> and/or <u>NEV</u> <u>NEW</u> Registered Agent: | Corporate Creations Network Inc. | | |
| NEW Registered Office Address: | 11380 Prosperity Farms Road #221E | | |
| (MUST BE FLORIDA STREET ADDRESS) | | | |
| | Palm Beach Gardens FL 33410 | | |
| or changes are made, the Florida street address of the registe identical. Or, in the case of a Florida limited liability compa | iws of the State of Florida, it is hereby confirmed that after the chango and office and the business office of the registered agent will be any, it is hereby confirmed that the change(s) was/were authorized by empany or as otherwise provided in the articles of organization or | | |
| by Gina Mulligan as attorney-in-fact (Printed or Typed name of signoc) | | | |
| I hereby accept the appointment us registered agent and aging of all statutes relative to the proper and complete performance my position as registered agent as provided for in Chapter 6 in the registered office address. Thereby confirm that the ling (Signature of Registered Agent) | ree to act in this capacity. I further agree to comply with the provisions ace of my duties, and I am familiar with and accept the obligations of 605, F.S. Or, if this document is being filed to merely reflect a change aited liability company has been notified in writing of this change. Mulligan, Special Secretary | | |
| Division of Corporations, P.O | Box 6327, Tallahassee, FL 32314 | | |
| Corporate Creations International Inc. | | | |
| 11380 Prosperity Farms Road #221E Palm Beach Gardens FL 33410 (561) 694-8107 | | | |

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