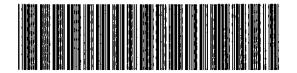
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DEC 28 2012

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations
SUBJECT: FRANKO-OIP LLC (Name of Limited Liability Company)
(Name of Edition Stability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
KRIS ALTER (Contact Person)
(Contact Person)
(Firm/Company)
21205 YACHT CLUB DRIVE # 2305 (Address)
(Address)
AVENTURA, 12 33180
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (305) 937 1448 (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:
□ \$25 Filing Fee
Certified Copy
STREET/COURIER ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations Division of Corporations
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301

CR2E079 (5/06)

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.

· · · · · · · · · · · · · · · · · · ·	AUKA OLO LLO
1. Name of the limited liability company:	
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	21205 YACHT CLUB PR #2305 AVENTURA, FZ 33180
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SAME AS ABOVE
11-12-2009 3. Date of filing/registration in Florida	L09000 108789 4. Document number
5. (a) Registered Agent and Registered Office shown on t	•
Registered Agent:	STEVEN REISMAN
Registered Office Address:	2875 NE 191 ST #801 AVENTURA, FE 33180
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	V Registered Office address: KRIS ALTER
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	21205 YACHT CLUB DR # 2305 AVENTURA ,FL 33180
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fland the business office of the registered agent will be identicability company, it is hereby confirmed that the change(s) he members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of a member or authorized representative of a member FRANK Printed or typed name of signee I hereby accept the appointment as registered agent and agreement of the provisions of all statutes relative to the province of the provisions of all statutes relative to the province of the provisions of the obligations of my positive to the provisions. I hereby confirm that the limited liability company of the provisions of the province of Registered Agent. Signature of Registered Agent.	aws of the State of Florida, it is hereby orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of se provided in the articles of organization or

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

INHS18 (05/08)