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TALL ANASSEE TATE



## **COVER LETTER**

TO: Registration Section Division of Corporation	ons								
NEWVUE IPTV SUBJECT:	LLC								
Name of Limited Liability Company									
Dear Sir or Madam:									
The enclosed Registered Agen	t/Registered Office	Change and	fee(s) are submitted for filing.						
Please return all corresponden	ce concerning this m	atter to the	following:						
JAVIER MORLA			207 SE						
Name	of Person	<del></del>	CRE TALL						
PACIFIC CABLE TELEVISION	INC.		TAP						
Firm/	Company	<del></del>	PA SSE						
1728 CORAL WAY, SUITE 800			2021 AUG -3 PM 3: 34 SECRETARY OF STATE TALLAHASSEE. FL						
Add	ress		—————————————————————————————————————						
MIAMI, FL 33145									
City/State	and Zip Code	· · ·	<del></del>						
jmorla@batanmiami.com									
E-mail address: (to be us	ed for future annual	report notif	leation)						
For further information concer	ning this matter, ple	ase call:							
Javier Morla		305 at (	529-2488						
Name of Person		ar (	Area Code & Daytime Telephone Number						
Mailing Address: Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	tions		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303						
Enclosed is a check f	or the following am	ount:							
■ \$25 Filing Fee		□ \$	\$55 Filing Fee & Certified Copy						

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.

2. (a)    1728 S.W. 22ND STREET   Principal office address of limited liability company: (Nate: MAY BE POST OFFICE BOX)   STH FLOOR   MIAMI, FL 33145   MIAMI, FL 33145	1. N	lame of the limited liability company: NEWVUE IPT	V LLC					
Principal office address of limited liability company: (Note: MAY BE POST OFFICE BOX)  STH FLOOR  MIAMI, FL 33145  DECEMBER 18, 2009  1.0900120491  3. Date of filing/registration in Florida 4. Document number  MURAI WALD BIONDO & MORENO, P.A.  Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 2121 PONCE DE LEON BLVD.  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  SUITE 600  CORAL GABLES  (b) CRISTINA MORENO P.A.  Enter name of NEW Registered Agent and/or NEW Registered Office address: SUITE 304  CORAL GABLES  (c) CORAL GABLES  (d) CRISTINA MORENO P.A.  Enter name of NEW Registered Office Address: SUITE 304  CORAL GABLES  (e) CORAL GABLES  (f) In 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) wastwere authorized by an affirmative ware or the members of the limited liability company or as otherwise provided in earliest of another of authorized representative of a member of the limited liability company.  Signature of a member of authorized representative of a member. Printed or typed name of signee  Phereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all stantes relative to the proper and complete performance of my duller, and I can familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. F.S. Or, if this document is being liked on the manifest of this change.	2. (a)	1728 S.W. 22ND STREET	1728 S.W. 22ND STREET					
DECEMBER 18, 2009  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:  2121 PONCE DE LEON BLVD.  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  SUITE 600  CORAL GABLES  FL  33134  CRISTINA MORENO P.A.  Enter name of NEW Registered Agent and/or NEW Registered Office address:  SUITE 304  CORAL GABLES  If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the changes or changes are made, the Florida street address of the registered office and the business office of the registered office and the definited liability company is in the change of a Florida limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. It is thereby 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 605, F.S. Or. If this document is being filed to mertily reflect a chapte in the registered office address, I hereby confirm that the limited liability company has been onlying of this change.  Contact of the confirmance of my duties, and I am familiar with and accept the obligations of my position as registered agent 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 605, F.S. Or. If this document is being filed to mertily reflect a chapte in the registered office ad	,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:					
DECEMBER 18, 2009  December 18, 2009  Logonol 20491  3. Date of filing/registration in Florida 4. Document number  5. (a)  MURAI WALD BIONDO & MORENO, P.A.  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  2121 PONCE DE LEON BLVD.  Registered Office Address  SUITE 600  CORAL GABLES  FL  33134  CRISTINA MORENO P.A.  Enter name of NEW Registered Agent and/or NEW Registered Office address:  SUITE 304  CORAL GABLES  SUITE 304  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 gent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) wastwere authorized byłan aftirmative 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 or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.  Signature of a neghter of authorized representative of a member  Frinted or typed name of signee  I hereby accept the appointment as registered agent and agree to act in this capacity. I farther 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 ability company is in the articles of organization of 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 605, F.S. Or. if this document is being filed to merelly reflect a chapte give in the registered office address, I hereby confirm that the limited liability company has been notified to writing of this charge.		5TH FLOOR	5TII FI	.OOR				
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