110000030351

(Re	questor's Name)	
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EXAMINER

Wrong form



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 27, 2010

ALAN LEVINE 1110 BRICKELL AVENUE, SEVENTH FLOOR MIAMI, FL 33131

SUBJECT: INTERNATIONAL EXHIBITORS HOLDINGS, LLC

Ref. Number: L10000085503

We have received your document for INTERNATIONAL EXHIBITORS HOLDINGS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 310A00029789

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.

Name of the limited liability company:International Exhibitors Holdings, LLC					
2. (a) Principal office address of limited liability comp	oany: 690 Lincoln I	690 Lincoln Road, Suite 303			
(Note: MUST BE STREET ADDRESS)	Miami Beach, FL 3313	Miami Beach, FL 33139 PO Box 19-0089 Miami Beach, FL 33119			
(b) Mailing address of limited liability company:	PO Box 19-0089				
(Note: MAY BE POST OFFICE BOX)	Miami Beach, FL 3311				
8-13-2010	L10000085	5503			
3. Date of filing/registration in Florida	4. Document number				
5. (a) Registered Agent and Registered Office shown	on the records of the Florida [
Registered Agent:	The L4 Group, Inc.	73 <u>7</u>			
Registered Office Address:	4027 194th Trail		٠		
,	Sunny Isles Beach, FL	33160: ;			
		<u> </u>			
		7, 3	ı -		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office addr	ess:			
NEW Registered Agent:	Alan W. Levine, Esquire	15	-		
NEW Registered Office Address:	1110 Brickell Avenue	1110 Brickell Avenue			
(MUST BE FLORIDA STREET ADDRESS)		Suite 700			
	Miami	,FL <u>3313</u> 1	<u> </u>		
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 idliability company, it is bereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	ne laws of the State of Florida, e Florida street address of the entical. Or, in the case of a Fle(s) was/were authorized by an herwise provided in the article any.	, it is hereby registered offic orida limited n affirmative v s of organizati	ote ion		
Mitchell Rubinson, Manager Printed or typed name of signee					
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address. I hereby confirm that the limited liability company of the confirmation of the company of the confirmation of	d agree to act in this capacity, proper and complete perform position as registered agent a merely reflect a change in the any has been notified in writin	I further agre ance of my dut s provided for registered offi g of this chang	e to ies, in cc ge.		

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

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I. Name of the limited liability company:	International Exhibitors, LLC				
2. (a) Principal office address of limited liability com	Principal office address of limited liability company:		690 Lincoln Road, Suite 303		
(Note: MUST BE STREET ADDRESS)	Mian	ni Beach, FL 3	3139		
(b) Mailing address of limited liability company:	690 Lincoln Road, Suite 303				
(Note: MAY BE POST OFFICE BOX)	Miami Beach, FL 33139				
8-4-2010	L10000030351				
3. Date of filing/registration in Florida	4. Do	cument number			
 (a) Registered Agent and Registered Office shown Registered Agent: 		ords of the Flori		f State:	
Registered Office Address:	4027	194th Trail	2-54	2	
			145, 2	er i	
(b) Enter name of NEW Registered Agent and/or	NEW Regi	istered Office a	ddress: 🚁		
NEW Registered Agent:	<u>Alan</u>	W. Levine, Esc	***	Product	
NEW Registered Office Address: 1 (MUST BE FLORIDA STREET ADDRESS) S		Brickell Avenu 700			
	<u>Miam</u>	าi	,FL	_ <u>33131</u>	
of 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 it is ability company, it is hereby confirmed that the change of the members of the highly dilability company or as of the operating agreement of the limited liability company or the operating agreement of the limited liability company.	ne Florida s dentical - O	street address of	the register	red office	
Mitchell Rubinson, Manager					
Printed or typed name of signee I hereby accept the appointment as registered agent are comply with the provisions of all statules relative to the und I am familiar with and accept the obligations of my hapter 608, F.S. Or, if this document is being filed to address. I hereby confirm that the limited liability companies of Registered Agent	nd agree to e proper an y position a merely ref pany has be	act in this capac d complete perfo s registered age lect a change in sen notified in wi	city. I furth ormance of nt as provid the registe riting of thi	ger agree to my duties, ded for in red office is change.	