

LI 0000042609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

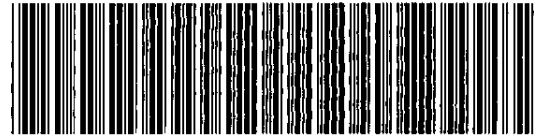
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL 32310

T. CLINE
DEC 15 2010
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 3 EAST CAPITAL LLC
Name of Limited Liability 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:

ALAN A. LIPS
Name of Person

GERTSON PRESTON ROBINSON
Firm/Company

666 71 STREET
Address

MIAMI BEACH, FL 33141
City/State and Zip Code

aal@gprco-cpa.com
E-mail address: (to be used for future annual report notification)

2010 DEC 14 AM 10:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA

For further information concerning this matter, please call:

ALAN LIPS at (305) 868-3600
Name of Person 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: 3 EAST CAPITAL LLC

2. (a) Principal office address of limited liability company: 666 71 STREET
MIAMI BEACH, FL 33141
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 666 71 STREET
MIAMI BEACH, FL 33141
(Note: MAY BE POST OFFICE BOX)

4/20/10
3. Date of filing/registration in Florida

L10000042609
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

~~ALAN LIPS~~ JORGE GURIAN

Registered Office Address:

~~666 71 STREET~~ 2665 S BAYSHORE DR 906
~~MIAMI BEACH, FL 33133~~
COCONUT GROVE, FL 33133

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

ALAN LIPS

NEW Registered Office Address:
(MUST BE FLORIDA STREET ADDRESS)

666 71 ST
MIAMI BEACH, FL 33141
FL

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 agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative 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.

Mark Mink
Signature of a member or authorized representative of a member

mark mink
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]
Signature of Registered Agent

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