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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Dusing a Fakha Nama) |
| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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TALLAHASSEF, ELGONIA

FILED

| COVER LETTER | | |
|---|--|--|
| TO: Registration Section Division of Corporations | | |
| SUBJECT: BIGRANG MIAMI FNTERTAINHENT WAR 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: | | |
| CARLOS OJEDA Name of Person | | |
| BIBBANG MIAMI ENTECTAINMENT | | |
| 7900 HARBOR ISLAND DR FIZZ MIAMI, FL 33141 | | |
| MIAMI, FL 33/4/ City/State and Zip Code | | |
| BIBANG MIAM LENT. & BIGBANGMIAMI @ GRAIL. COTT E-mail address: (to be used for future annual report notification) | | |
| For further information concerning this matter, please call: | | |
| CARLOS OSEDA at (305) 213 95/2 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 \$\sum \\$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.

| 2 2 | 11 | |
|--|--|--|
| 1. Name of the limited liability company: BIGBANC | MIAMI ENTERTAINMENT CO | |
| 2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) | 7900 HARBOR ISLAND DR #820 MIAMI FL 33141 | |
| (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | | |
| 06/14/2010 | 610000063349 | |
| 3. Date of filing/registration in Florida | 4. Document number | |
| 5. (a) Registered Agent and Registered Office shown on t | he records of the Florida Dept. of State: | |
| Registered Agent: | CARLOS OTEDA | |
| Registered Office Address: | 7900 HARBOR ISLAND DR | |
| | MIAMI, FL 33141 | |
| (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: | | |
| NEW Registered Agent: | | |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | 7900 HARBOR ISLAND DR. #1122 MIAMI ,FL 33ML | |
| If the limited liability company is not organized under the I confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) the 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 Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the province of the province of the obligations of my possible of the province of the province of the obligations of the oblight of the obligations of the obligati | 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 the provided in the prov | |
| - Inhola | has been notified in writing of this change. | |
| Signature of Registered Agent | 07 T H 1 F2 20214 | |
| Division of Corporations, P.O. Box 63 | Z/, Tallahassee, FL 32314 | |

FILING FEE: \$25.00

INHS18 (05/08)