L10000084221

(Re	questor's Name)					
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J. BRYAN

AUG 23 2010

EXAMINER

COVER LETTER

то:	Registration Section Division of Corporations					
SUBJ		MAAZM Enterprises, LLC Name of Limited Liability Company				
Dear 9	Sir or Madam:					
Dear	or wadam.					
The e	nclosed Registered Agent/Registere	d Office (Change	and fee((s) are submitted	d for filing.
Please	e return all correspondence concern	ing this m	atter to	the follo	owing:	
	Randolph M. Brombacher	, Esq.				
	Name of Person					
						PEG
	Saavedra, Pelosi, Goodwin &	<u>Hermanr</u>)			全然后
	Firm/Company					ASS 20
						EF C
	312 S.E. 17th Street, Secon	<u>id Floor</u>				Pos
	Address					ORBE OR
	Fort Lauderdale, Florida 3	33316				1 2
	City/State and Zip Code			_		
E	kdavis@lawspgh.com	1 ort notificatio	on)			
For fu	orther information concerning this n	natter nle:	ase call	•		
10114	in the information concerning and in	intier, pret	ase can	•		
	Kathy R. Davis		954	`	767-63	33
	Name of Person	at (Area Code	& Daytime Telepho	
	STREET/COURIER ADDRESS:				ADDRESS:	
	<u> </u>		gistration	Corporations		
			D. Box 632			
	2661 Executive Center Circle	•			Florida 32314	
	Tallahassee, Florida 32301		141		. 1011au 22214	
	Enclosed is a check for the follo	wing amo	ount:			
	\$25 Filing Fee		☐ \$5	55 Filing	Fee & Certifie	d 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:	MAAZM Enterprises, LLC
2. (a) Principal office address of limited liability company	y: 1692 South Ocean Lane, #166
(Note: MUST BE STREET ADDRESS)	Fort Lauderdale, Florida 33316
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	- FRET
August 11, 2010	L1000008422
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. State:
Registered Agent:	Randolph M. Brombacher, Esq.
Registered Office Address:	312 S.E. 17th Street, 2nd Floor Fort Lauderdale, Florida 33316
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent:	
NEW Registered Agent:	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	401 East Las Olas Boulevard #130-176 Fort Lauderdale ,FL 33316
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member	lorida street address of the registered office
Michael Silvester 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 prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compand	igree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.

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

Signature of Registered Agent