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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | Certificates | s of Status |
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COVER LETTER

Registration Section

Division of Corporations

TO:

| SUBJECT: Bewired USA 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: | | |
| Alexander Urizarbarrena Name of Person | | |
| Bewired USA LLC Firm/Company | | |
| 5101 NW ZIST Ave. Suite 240 | | |
| Fort Lawerdale, Florida 33309 City/State and Zip Code | | |
| <u>alex fortunamia</u> <u>annual report notification</u>) | | |
| For further information concerning this matter, please call: | | |
| Alexander Unzarbarrena at (305) 342 - 2885 Name of Person Area Code & Daytime Telephone Number | | |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 | | |

Tallahassee, Florida 32314

□ \$55 Filing Fee & Certified Copy

2661 Executive Center Circle

Enclosed is a check for the following amount:

Tallahassee, Florida 32301

\$25 Filing Fee

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR L'IMITED 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 holh, in the State of Florida.

| erit or worth, in vie state of a transfer | |
|--|--|
| 1. Name of the limited liability company: <u>BOUNGE</u> | JUSA LLC |
| 2. (a) Principal office address of limited liability compan (Nove: MUST BE STREET ADDRESS) | y:5101 WW ZB+ AVO Sulte ZYO F+ Landerdale, FL 33309 |
| (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | Sinte 240 Ft Landerdale, FC 33309 |
| 11/04/2010 3. Date of filling/registration in Florida | <u>L10000115729</u> 4. Document number |
| 5. (a) Registered Agent and Registered Office shown on | the records of the Florida Dept. of State: |
| Registered Agent: | alexander Urizarbarrena |
| Registered Office Address: | 2470 NW 102nd Pl. Suite 202 Doral, Florida 33172 |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> | W Registered Office address: |
| NEW Registered Agent: | alexander Urizarbarreno |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | Stol NW ZIST Ave Suite 240 Fort Lauderdale ,FL 33309 |
| 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 iden liability company, it is bareby confirmed that the change(s the members of the limited liability company or as otherw the operating agreement of the limited liability company. Signature/of a member of authorized representative of a member Alkander Vilology Company | Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of ise provided in the articles of organization or the articles organization or the article |
| Signature of Registered Agont | |

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

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