L110000002813

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EXAMINER

COVER LETTER

Division of Cor					
	Miami (Sasina I	Managama	ont IIC	
SUBJECT:			<u>Manageme</u>		
	Name of	Limited I	iability Com	pany	
Dear Sir or Madam:					
The enclosed Registere	d Agent/Registered (Office Ch	ange and fee(s) are submitted for filin	ıg.
Please return all corres	pondence concerning	this mat	ter to the follo	owing:	
Ro	bert W. Hudson				
	Name of Person				
	on & Calleja, LLC	<u></u>			
3211 Ponce De	<u>a Leon Boulevard, S</u> Address	Suite 102	2		
	Gables, FL 33146 (State and Zip Code				
rhudson	@hudsoncalleja.cc	m			THE STATE
E-mail address: (to be u	sed for future annual report	notification)			3 1 7 5
For further information	concerning this mat	tter, pleas	e call:		
James		at (612)	768-3475	
Name of F	'erson		Area Code	& Daytime Telephone Number	
Registration Sec			MAILING Registration	Section	
Division of Corp Clifton Building			P.O. Box 63	Corporations 27	
2661 Executive Tallahassee, Flo	Center Circle			Florida 32314	
	heck for the followi	ing amou	nt:		
\$25 Filing F	ee	[\$55 Filing	Fee & Certified Copy	

INHS18 (5/08)

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:	Miami Casino Management, LLC		
2. (a) Principal office address of limited liability cor	npany: 21001 N. Tatum Boulevard		
(Note: MUST BE STREET ADDRESS)	Suite 1630-256 Phonix, AZ 85050		
(b) Mailing address of limited liability company:	21001 N. Tatum Boulevard		
(Note: MAY BE POST OFFICE BOX)	Suite 1630-256 Phonix, AZ 85050		
January 7, 2011	L11000002813		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office show	on on the records of the Florida Dept. of State:		
Registered Agent:	Rene W. Guim		
Registered Office Address:	888 Brickell Key Drive Suite 1501 Miami, FL 33131		
(b) Enter name of <u>NEW Registered Agent</u> and/o <u>NEW Registered Agent</u> :	Robert W. Hudson		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Hudson & Calleja, LLC (1) F 3211 Ponce De Leon Boulevard, #102 Coral Gables FL33134		
If the limited liability company is not organized unde confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the char of the members of the limited liability company or as or the operating agreement of the limited liability confirmed that the characteristic of the limited liability company or as or the operation of the limited liability confirmed that the characteristic of the limited liability company or as or the operation of the limited liability confirmed that the characteristic of the limited liability company or as or the operation of the limited liability company or as or the operation of the limited liability company or as or the operation of the limited liability confirmed that the characteristic of the limited liability company or as or the operation of the limited liability confirmed that the characteristic of the limited liability confirmed that the characte	the Florida street address of the registered office identical. Or, in the case of a Florida limited needs) was/were authorized by an affirmative vote		
Printed or typed name of signee			
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to t and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability con	and agree to act in this capacity. I further agree to he proper and complete performance of my duties, my position as registered agent as provided for in to merely reflect a change in the registered office mpany has been notified in writing of this change.		
Signature of Registered Agent			

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 F1LING FEE: \$25.00