L1100002813

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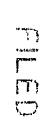


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SECRETARY OF STATE

AUG 29 2013



COVER LETTER

TO: Registration Section Division of Corporations

Miami Casino Management, 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:

Rene Guim

Name of Person

Miami Casino Management, LLC

Firm/Company

888 Brickell Key Drive, Suite 1501

Miami, FL 33131

City/State and Zip Code

rwguim@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rene Guim

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

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.

Registered Office Address: Registered Office Address: Hudson & Calleja, LLC Coral Gables, FL 33134 Coral Gables,		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) January 7, 2011 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. of S. Registered Agent: Registered Office Address: Registered Office Address: NEW Registered Agent: NEW Registered Agent: NEW Registered Office Address: NEW R		
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Printed or typed name of signee	d offic nited tive vo	ote of
I hereby accept the appointment as registered agent and agree to act in this capacity. I furth comply with the provisions of all statutes relative to the proper and complete performance of and I am familiar with and accept the obligations of my position as registered agent as provid Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the register address, I hereby confirm that the limited liability company has been notified in writing of this		e to ies,

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