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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Party Central Miami, LC. 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:	
Name of Person	
Partyy Central Mani, UC Firm/Company	
18811 NW 84 Avenue, Address	
Haleah F1. 33015 City/State and Zip Code City/State and Zip Code City/State and Zip Code	~~
Partycentralmiania live com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Nikole M. John at (305) 318 - 3381 Name of Person Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother 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 & 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.

agent, or both, in the state of Florida.			
1. Name of the limited liability company: Partuy Ce	entral Hiami, LC		
2. (a) Principal office address of limited liability company	: 18811 NW 84 Avenue		
(Note: MUST BE STREET ADDRESS)	Hialeah, Fl. 33015.		
(b) Mailing address of limited liability company:	18811 NW 84 Ave		
(Note: MAY BE POST OFFICE BOX)	Hiakah, Fl 33015		
August 12, 2011 3. Date of filing/registration in Florida	LIIDOOD93648. 4. Document number		
5. (a) Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:		
Registered Agent:	Matt Pfleging, us corpagents		
Registered Office Address:	United States Corporations Agents, in 13302 winding Caff Cant, Suite Tampa, FI. 33723		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:			
NEW Registered Agent: C/O	Partyly Centrolly Mismillic		
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	NIKOLE JOHNET - 18811 NWBY AVENUE - HIGKAH ,FL 33015		
If the limited liability company is not organized under the legistered that after the change or changes are made, the Fl and the business office of the registered agent will be ident liability 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	forida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization		
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 product and I am familiar with and accept the obligations of my po. Chapter 608, F.S. Or, if this document is being filed to mel address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to sper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.		
Signature of Registered Agent			

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