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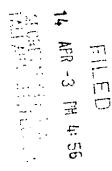
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COVER LETTER

то:	Registration Section Division of Corporations						
SUBJECT: CCGI/LIPB, LLC							
	Name of Limited Liability Company						
Dear Si	ir or Madam:						
The end	closed Registered Agent/Registered Office	Change and fe	e(s) are submitted for filing.				
Please i	return all correspondence concerning this i	natter to the fo	llowing:				
Mirion	m Katz						
winan		···	_				
	Name of Person						
Vcorp	Services, LLC						
•	Firm/Company	******	•				
25 Ro	obert Pitt Drive, Suite 204		_				
	Address						
Mons	ey, NY 10954		_				
	City/State and Zip Code		•				
	@Vcorpservices.com						
E	-mail address: (to be used for future annua	I report notifica	ation)				
For fur	ther information concerning this matter, pl	case call:					
Mirian	n Katz	at (425-0077				
	Name of Person		Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: MAILING ADDRESS:			LING ADDRESS:				
	Registration Section	Registration Section					
	Division of Corporations	Division of Corporations					
	Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314					
	Tallahassee, Florida 32301	រេងរងេ	inassec, fiorida 323.14 ,				
	Enclosed is a check for the following as	mount:					
	2 \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy				

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to The provisions of sections 605.0114 or 605.0116, 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. Na	ime of the limited liability company: CCGI/LIPB, L	LC				
2. (a)	1691 MIGHICAN AVENUE, STE. 601		_{b)} 1691 MI	GHICAN AVE	NUE, S	TE. 601
\- ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	,	-	Mailing address of lit (Note: MAYBE I		
	Miami Beach FL 33139	the total to	Miami B	each FL 3313	9	····
	10/06/2011		L1100011	14530		
3.	Date of filing/registration in Florida	4.	***************************************	Document numb	per	
5. (a)	THE BERNSTEIN LAW FIRM					
(u)	Registered Agent and Registered Office shown on the records of	the Floric	là Dept. of State	• å:		
	1688 MERIDIAN AVENUE					
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRES	ফ্র	•		
	SUITE 418					
	MIAMI BEACH , FI	33139)	<u>.</u>		
(b)	Vcorp Services, LLC	,			7 % 3.14 7 % 3.14 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	14
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:	-		第三
	5011 South State Road 7, Suite 106					-3 I
	NEW Registered Office Address:			.		∰ □
	Davie , I'I	33314			; +	တ
the cha agent v was/we the arti	imited liability company is not organized under the lange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited libra authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	f the reg ability of of the lin timited	istered office company, it is nited liability liability con	c and the busines s hereby confirm y company or as	s office of ed that the otherwise	f the registered e change(s) provided in
	ture of a member or authorized representative of a member					
provisi the obli to merc notified VA()	by accept the appointment us registered agent and aging ons of all statutes relative to the proper and complete igations of my position as registered agent as provide the reflect a change in the registered office address, I in writing of this change. Soft (CS, LH, Man, 6) The ot Registered Agent	perfori d for in hereby	nance of my c Chapter 605 confirm that	duties, and Lam i, F.S. Or, if this the limited liabil	igree to co Jamiliar w document ity compa	omply with the vith and accept t is being filed ny has been

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