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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Magazineco U. Name of Li	.C mited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning th	nis matter to the following:	
Reid Shapino Name of Person		
Elephant Group, In)C	Markey pla
3303 West Commercia	al Blud	The same of the sa
Fort Louderdale, FL City/State and Zip Code	<u>33309</u>	Pare 1
Porcuane @ elephant of E-mail address: (to be used for future annual report no	proup. Com	
For further information concerning this matter	, please call:	
Paula McKare Name of Person	at (954) 657-9600 ex+ 775 Area Code & Daytime Telephone Number	5 O
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	

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.

1. Name of the limited liability company: Magaz	Pineco LLC
2. (a) Principal office address of limited liability comp (<i>Note: MUST BE STREET ADDRESS</i>)	Fort Laurendele, Fl 33309
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	3303 West Commercial Blud Fort Laudendale, FL 33309
03/16/2012	L 12000037311
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 State:
Registered Agent:	Reid Shapino
Registered Office Address:	5259 Coconut Creek Parkway Margate, FL 33063
(b) Enter name of NEW Registered Agent and/or !	Substitution of the state of th
NEW Registered Agent:	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3303 West Commercial Blud Fort Lauderdale FL 33309
If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company. Signature of a member of authorized representative of a member. Reid Shapin. Printed or typed name of signee.	e Florida street address of the registered office lentical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote of rwise provided in the articles of organization or

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent