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## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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## 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.

. (a)	5118 N. 56TH STREET	(b) 5118 N. 56TH STREET		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0/	Mailing address of limited liability company: (Note: MAX BE POST OFFICE BOX)	
	TAMPA, FL 33610	T/	AMPA, FL 33610	
	03/19/2012	L12	000038483	
	Date of filing/registration in Florida		Document number	
(a)	CORPORATION SERVICE COMPANY			
. (4)	Registered Agent and Registered Office shown on the records of 1201 HAYS STREET	of the Florida Dept	of State:	
	Registered Office Address (MUST BE FLORIDA STREET	<u>CADDRESS)</u>	18 12 1 18 1 18	
	TALLAHASSEE	-L 32301		
	, F	L		
(b)	Corporate Creations Network Inc.		SSEE FL	
	11380 Prosperity Farms Road #221E			
	Palm Beach Gardens	1_ <mark>33410</mark>	······	
ie chai gent w as/wei	mited liability company is not organized under the la nge or changes are made, the Florida street address of ill be identical. Or, justhe case of a Florida limited l re authorized by an affirmative vote of the members cles of organization of the operating agreement of the	of the registered liability compar of the limited I e limited liabili	I office and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.	
	/ which we have a second secon	Carlos I	M Alvarez, Attorney-in-Fact	
	ure of a member or authorized representative of a member		Printed or typed name of signer	
Signan hereb	ure of a member or authorized representative of a member by accept the appointment as registered agent and are ons of all statutes relative to the proper and complete gations of miposition as registered agent as provid by reflect a change in the registered office address, h in writing of this change.	gree to act in th e performance va for in Chapt I hereby confirm	Printed or typed name of signee is capacity. I further agree to comply with the of my duties, and I am familiar with and accep er 605, F.S. Or, if this document is being filed in that the limited liability company has been	
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Signan hereb ovisio e obli mere stified	by accept the appointment as registered agent and an ons of all statutes relative to the proper and completing attons of maposition as registered agent as provid by reflect a change by the registered office address, i in wright of this change. Carlos M. Alvarez, Spect of Registered Agen Division of Corporations P.O.	gree to act in th e performance i ed for in Chapt hereby confirm <b>cial Secretary</b>	is capacity. I further agree to comply with the of my duties, and I am familiar with and accep er 605, F.S. Or, if this document ts being filed n that the limited liability company has been	