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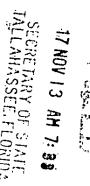
(Re	questor's Name)	· ·					
(Address)							
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(City/State/Zip/Phone #)							
PICK-UP	WAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
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COVER LETTER

Registration Section

TO:

INHS18 (2/14)

Divi	sion of Corporations					
SUBJECT:	Marketplace Concession MIA, LLC					
SUBJECT;	Name of Limited Liability Company					
Dear Sir or N	Madam:					
The enclosed	d Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.			
Please return	n all correspondence concerning th	is matter to the	following:			
Deborah L	.ove					
	Name of Person					
Friedman,	Rosenwasser & Goldbaum,	P.A.				
	Firm/Company		<u> </u>			
7280 W. F	Palmetto Park Road, Ste. 202	!-N				
	Address					
Boca Rato	on, FL 33433					
	City/State and Zip Code		_			
dlove@frg						
E-mail	address: (to be used for future and	nual report noti	fication)			
For further i	nformation concerning this matter,	, please call:				
Deborah L	.ove	561	404-8755			
	Name of Person	(Area Code & Daytime Telephone Number			
Registration Section Regis Division of Corporations Divisi Clifton Building P.O. I			AILING ADDRESS: egistration Section evision of Corporations O. Box 6327 allahassee, Florida 32314			
Enc	losed 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 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.

i. Na	ame of the limited liability company: Marketplace C	Conce	ession MIA, LLC	
2. (a)	3585 NE 207th Street C9		(b) P.O. Box 8015	04
- . (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	Mailing ad	dress of limited liability company: MAY BE POST OFFICE BOX
	Suite 801504		Miami, FL 3328	0
	Miami, FL 33280			
	06/22/2012		L12000083022	
3.	Date of filing/registration in Florida	4.	Docume	ent number
5. (a)	Friedman, Rosenwasser & Goldbaum, P.A.			
J. (a)	Registered Agent and Registered Office shown on the records of t	he Flor	ida Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 5355 Town Center Rd., Ste. 801			17 NOV SEGRET TALLAHA
(b)	Boca Raton , FL 33486 Friedman, Rosenwasser & Goldbaum, P.A.			HOV 13 AM RETARY OF AHASSEE, F
	Enter name of NEW Registered Agent and/or NEW Registered Office address: Friedman, Rosenwasser & Goldbaum, P.A.			AM 7: 30 CE. FLORIDA
	NEW Registered Office Address:			
	7280 W. Palmetto Park Rd., Ste. 202-N			
	Boca Raton, FL	3343	3	
the cha agent v was/wa	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members o icles of organization or the operating agreement of the	the re ability f the l	gistered office and the company, it is hereby imited liability compa	business office of the registered confirmed that the change(s)
Ch	english and air	С	hris McFarlane	
Signa	ture of a member or authorized representative of a member	_	Printed o	or typed name of signee

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 605, 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.

Ranaldy . Yasınwassu Signature of Registered Agent