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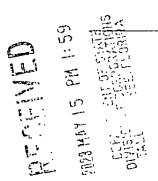
From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Fax Number : (855)330-1010

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LLC REGISTERED AGENT CHANGE BV GLOBAL, LLC

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T. LEMIEUX

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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.

1: Name of the limited liability company: BV GLOB	AL, LLC
2 (a)	do
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)
7901 4th St N STE 300	7901 4th St N STE 300
St. Petersburg FL 33702	St. Petersburg FL 33702
07/27/12	L12000097274
3. Date of filing/registration in Florida	4. Document number
5. (a) THE LAW OFFICES OF NICK SPRADI	LIN. PLLC
Registered Agent and Registered Office shown on the records of the	e Florida Dept. of State:
4300 BISCAYNE BLVD	
Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)
SUITE 203	
MIAMI , FL3	3137 S
(b) Northwest Registered Agent Ll	
Enter name of NEW Registered Agent and/or NEW Registered O	ffice address:
7901 4th St N	
NEW Registered Office Address:	•
STE 300	
St. Petersburg3	3702
If the limited liability company is not organized under the laws the change or changes are made, the Florida street address of the agent will be identical. Or, in the case of a Florida limited liab was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the line. Signature of a member or authorized representative of a member. I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete per the obligations of my position as registered agent as provided to merely reflect a change in the registered office address. The notified in writing of this change.	ne registered office and the business office of the registered ility company, it is hereby confirmed that the change(s) the limited liability company or as otherwise provided in mited liability company. Nat Smith Printed or typed name of signee Let a act in this canacity. I further agree to comply with the

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

Taylor Newman - Assistant Secretary

Signature of Registered Agent

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