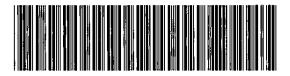
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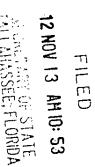
| (Re | equestor's Name) | |
|---|--------------------|-----------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Nan | ne) |
| | | |
| (Document Number) | | |
| Certified Copies | Certificates | of Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations | | | |
|--|---|--|--|
| | Poplife Entertainment Group, LLC Name of Limited 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: | | |
| | | | |
| Lisa Shults | . | | |
| Name of Person | | | |
| Councida Dinast Inst | | | |
| Corporate Direct, Inc. | | | |
| | | | |
| 2248 Meridian Blvd Ste H | | | |
| Address | | | |
| * | | | |
| Minden, NV 89423 | | | |
| City/State and Zip Code | | | |
| Ishults@corporatedirect.com E-mail address: (to be used for future annual report not | ification) | | |
| For further information concerning this matter | , please call: | | |
| Lisa Shults | at (775) 284-7167 | | |
| Name of Person | Area Code & Daytime Telephone Number | | |
| 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: Po | y: Poplife Entertainment Group, LLC | |
|---|---|--|
| 2. (a) Principal office address of limited liability comp | pany: 253 NE 2nd Street 1903 | |
| (Note: MUST BE STREET ADDRESS) | Miami, FL 33132 | |
| | | |
| (b) Mailing address of limited liability company: | 253 NE 2nd Street 903 2 | |
| (Note: MAY BE POST OFFICE BOX) | Miami, FL 33132 | |
| | SS 3 F | |
| 10/26/2012 | L12000136844 | |
| 3. Date of filing/registration in Florida | 4. Document number | |
| 5. (a) Registered Agent and Registered Office shown on the records of the Florida Depte of State: | | |
| Registered Agent: | Mark Lesniak | |
| Registered Office Address: | 10 NE 7th Street | |
| - | Miami FL 33136 | |
| | | |
| (b) Enter name of NEW Registered Agent and/or I | NEW Registered Office address: | |
| NEW Registered Agent: | Gerri Detweiler | |
| NEW Registered Office Address: | 1037 Greystone Lane | |
| (MUST BE FLORIDA STREET ADDRESS) | | |
| | Sarasota ,FL34232 | |
| 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 of the members of the limited liability company or as or the operating agreement of the limited liability company. | the laws of the State of Florida, it is hereby the Florida street address of the registered office dentical. Or, in the case of a Florida limited the e(s) was/were authorized by an affirmative vote therwise provided in the articles of organization pany. | |
| Signature of a member or authorized representative of a member | | |
| Mark Lesniak, Member of Building Blocks of Culture Printed or typed name of signee | ure, | |

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

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 focument is being filed to merely reflect a change in the registered office address II hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent