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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Back By Popular Demand, LLC Name of Limited Liability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Eric Joung Name of Person
Back By Popular Demand, LLC.
16970 NW 27th Ave
Mami Gardens Fl 33056 City/State and Zip Code
E-pail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Steven Joung at (954) 548-1733 Name of Person at (954) Suprime 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: Back b	y Popular Demand, LLC
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	Migni Gardens Fl. 33056
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Miami Gardens, Fl. 3 33056
2/13	L13000014352
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:
Registered Agent:	Eric Young
Registered Office Address:	3299 NW 169th Terr Miami Gardens, Fl.
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u> <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address: <u>(MUST BE FLORIDA STREET ADDRESS)</u>	EW Registered Office address: Darrien Anderson 16970 NW 27th Ave Miami Gardens FL 33056
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide 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 Printed or typed name of signee	Florida street address of the registered office entical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote of wise provided in the articles of organization or
I hereby accept the appointment as registered agent and comply with the provisions of all statules relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Ow if this document is being filed to indudress, I hereby confirm that the limited liability compa	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.

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

Signature of Registered Agent