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COVER LETTER

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	<u> </u>				
Divi	ision of Corporations				
SUBJECT:	11976 South Florida LLC				
Name of Limited Liability Company					
Dear Sir or I	Madam:				
The enclosed	d Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.		
Please return	n all correspondence concerning thi	s matter to the f	ollowing:		
Cay Tran					
	Name of Person				
11976 Soi	uth Florida LLC				
	Firm/Company				
1206 Duffe	erin Street				
	Address		_		
Toronto, C	Ontario, M6H 4B9				
	City/State and Zip Code		_		
trancay@l	hotmail.com				
E-mail	address: (to be used for future annu	ual report notifi	cation)		
For further i	nformation concerning this matter,	please call:			
Cay Tran		416 at (539-9504		
	Name of Person		Area Code & Daytime Telephone Number		
STR	REET/COURIER ADDRESS:	MA	ILING ADDRESS:		
_	istration Section	Registration Section			
	sion of Corporations	Division of Corporations			
	ton Building	P.O. Box 6327			
	l Executive Center Circle ahassee, Florida 32301	Tallahassee, Florida 32314			
Enc	losed is a check for the following	amount:			
☑ \$:	25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy		
INHS18 (2/14	4)				

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. Na	ame of the limited liability company: 11976 South	Florida LLC		
2. (a)	1206 Dufferin Street	(b) 1206 Dufferin Street		
-	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ,,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Toronto, Ontario	Toronto	, Ontario	
	M6H 4B9, Canada	M6H 4B	39	
	03/05/2013	L130000	33611	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Janet Bruttell Inc.			
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of Stat	e:	
	Registered Office Address 261 NW 16 Street	4DDRESS)	_	
	Pompano Beach , FL	33060	_	
(b)	Bit Kwong Lau		- ≥	
(5)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	16 MAY 1	
	NEW Registered Office Address:			
	157 Hamilton Terrace			
	West Palm Beach , FL	33414	TORIUS	
the cha agent v was/we	imited liability company is not organized under the lavinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liater authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registered offic ability company, it is of the limited liabilit limited liability cor	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in	
Signa	ture of a member or authorized representative of a member	Cay Tran	Deine de la constant	
I here provisi the obl to mer notified	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I is don't not be a change of this change.	ee to act in this cap performance of my d for in Chapter 60: hereby confirm that	Printed or typed name of signee pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	