

12/30/13 15:11 FAX 302674-266

Division of Corporations

L130000036643

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : NRAM SERVICES, LLC
Account Number : 120566000104
Phone : (302) 674-6089
Fax Number : (302) 674-6266

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: monika.namath@gmail.com

RECEIVED
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**LLC REGISTERED AGENT CHANGE
ARTE METIS LLC**

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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 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: ARIE METIS, LLC

2. (a) Principal office address of limited liability company: 150 West 56th St, Apt. 4901
(Note: **MUST BE STREET ADDRESS**) New York, NY 10019

(b) Mailing address of limited liability company: 150 West 56th St, Apt. 4901
(Note: **MAY BE POST OFFICE BOX**) New York, NY 10019

03/11/2013

3. Date of filing/registration in Florida

L13000036643

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State

Registered Agent:

Corporation Service Company

Registered Office Address:

1201 Hays Street

Tallahassee, FL 32301

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

NRAI Services, Inc

NEW Registered Office Address:

1700 South Pine Island Road

(**MUST BE FLORIDA STREET ADDRESS**)

Plantation

FL 33324

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

MONIKA NAMATH

Printed or typed name of signer

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 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.

By

NRAI Services, Inc

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INSTR 105/08

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