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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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LLC REGISTERED AGENT CHANGE **ZABO MIAMI 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 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	me of the limited liability company: ZABO MIAMI	LLC	
	16901 COLLINS AVENUE, UNIT 3603	(b) 407	Lincoln RD, PH-NE
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	SUNNY ISLES BEACH, FL 33160	Mian	ni Beach, FL 33139
	08/22/2013	L1300	00118875
3.	Date of filing/registration in Florida	4.	Document number C
<i>E</i> (a)	Barbosa Legal		
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of	State:
	407 Lincoln RD, PH-NE		<u> </u>
	Registered Office Address (MUST BE FLORIDA STREET)	(DDRESS)	
	Miami Beach , FL	33139	
(b)	CORPORATE CREATIONS NETWORK, IN		
(-,	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	
	801 US HWY 1		
	NEW Registered Office Address:		
	NORTH PALM BEACH, FL	33408	
the ch	limited liability company is not organized under the lar ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- rere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the registered to ability company of the limited liability limited liability.	the distriction of the registered (it is hereby confirmed that the change(s) ability company or as otherwise provided in a company.
- 5:	ature of a member or authorized representative of a member	Jenisa II	Printed or typed name of signee
I here provis the ob- to men	ehy accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change. Jenisa Irizarry, Special	ed for in Chapté hereby confirm	comparing I further agree to comply with the
Sign	ure of Registered Agent	· - · · · · · · · · · · · · · · ·	