## T1300011118

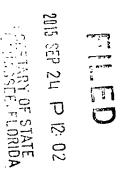
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	■ \$25 Filing Fee	<b>□</b> \$	55 Filing Fee & Certified Copy				
	Enclosed is a check for the following	g amount:					
	Tallahassee, Florida 32301	1.	ananassee, i fortua 32317				
	Clifton Building 2661 Executive Center Circle		O. Box 6327 allahassee, Florida 32314				
	Division of Corporations	•					
	Registration Section		egistration Section				
	STREET/COURIER ADDRESS:		AILING ADDRESS:				
	Name of Person		Area Code & Daytime Telephone Num	ber			
Alexa	ander Pena, Esq.	305 at (	859-8107 )				
For fu	rther information concerning this matter	, please call:					
I	E-mail address: (to be used for future ann	nual report noti	fication)				
csan	tos@sordolaw.com						
	City/State and Zip Code		<u> </u>				
Coco	nut Grove, FL 33133						
	Address		<del></del>				
3006	Aviation Ave, Suite 2A						
	Firm/Company						
FLOF	RIDA CORPORATE SERVICES, I	LC.	<u></u>				
	Name of Person						
Please	return all correspondence concerning th	is matter to the	following:				
The er	nclosed Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.				
Dear S	Sir or Madam:						
	Name of Limited Liability Company						
SUBJ	ECT: CPV HOLDINGS, LLC.						
TO:	Registration Section Division of Corporations		^				

INHS18 (2/14)

## 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.

(a)		(b)			
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		N	Mailing address of limited li (Note: MAY BE POST (	
	2875 NE 191 Street, 404			(Note: MATA DE L'OST	711102 0070
	Aventura, FL 33180				· .
		<del></del>			
	12/3/2013	L	1300016	67118	
	Date of filing/registration in Florida	4.		Document number	
(a)	Premier Busisness Management, LLC.				
(a)	Registered Agent and Registered Office shown on the records of	of the Florida I	Dept. of State	- 2:	
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	<u> </u>	•	
	2875 NE 191 Street, 404	-		27	
	Aventura	<sub>FL</sub> 33180		2915 SEP	A RESPUENCE
	,			P 21	Constitution of the Consti
(b)	Enter name of NEW Registered Agent and/or NEW Register	ed Office add	ress:	- 'mi	
	FLORIDA CORPORATE SERVICES, LLC	<b>).</b>		P 12: 02	
	NEW Registered Office Address:			- p 10	
	3006 Aviation Ave., Suite 2A			_	
	Coconut Grove	<sub>F1</sub> 33133			
e cha gent v as/wo	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the regist liability cor s of the limit he limited lia	ered office npany, it is ted liability	e and the business offices hereby confirmed that y company or as other apany.	ce of the register at the change(s)
Signa	ture of a member or authorized representative of a member			Printed or typed name of	signee
here. rovisi e obl mere	by accept the appointment as registered agent and a ons of all statives felative to the proper and comple igations of my position as registered agent as provide ely reflect a charge in the registered office address, d in writing of this change.	igree to act i te performa ded for in Ci I hereby coi	in this cape nce of my d hapter 605 nfirm that t	acity. I further agree of duties, and I am famili 5, F.S. Or, if this docu the limited liability co	to comply with the ar with and accoment is being fil- mpany has been

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