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PICK-ÚP	WAIT	MAIL	
(Business Entity Name)			
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SECRETARY OF STATE

## **COVER LETTER**

Division of Corporations				
SUBJECT: World Entertainment Services, LLC (Name of Limited Liability Company)				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Chang	e and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:				
Jeremy Thompson, Esq. (Name of Person)				
Bonnier Corporation				
(Firm/Company)				
460 N. Orlando Avenue; Suite 200				
(Address)	<del>_</del>			
Winter Park, FL 32789				
(City/State and Zip Code)	<del></del>			
For further information concerning this matter, please ca	11:			
Jeremy Thompson at (407	571-4715			
(Name of Person)	(Area Code & Daytime Telephone Number)			
Registration Section R Division of Corporations D Clifton Building P.	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.

agent, or both, in the state of Fioriaa.				
1. The name of the limited liability company is: $\underline{\underline{}}$	Norld Entertainment Services, LLC			
2. The mailing address of the limited liability company is : 460 North Orlando Avenue, Suite 200,				
Winter Park, FL 32789				
11/07/2001	M01000002503			
3. Date of filing/registration in Florida	4. Document number			
5. The name of the registered agent and the registe Florida Department of State:	red office address as shown on th	e records of the		
NRAI Services, Inc.				
	Name			
2731 Executive Park D	rive; Suite 4			
A	ddress	TAL SE		
Weston, FL 33331				
City, S	tate and Zip	ARET EB		
6. The name and address of the new registered age	nt and/or office:	EB 14 PM 1:44  RETARY OF STATE AHASSEE FLORIDA		
Jeremy Thompson, Es	sq. c/o Bonnier Corporation	PM 1: 44  OF STATE EE FLORID		
	ame	51 :		
	460 North Orlando Avenue			
Florida street address (	P.O. Box <b>NOT</b> acceptable)	<b>D</b> '''		
Winter Park	FL 32789			
City, Sta	ite and Zip			
If the limited liability company is not organized ur confirmed that after the change or changes are made and the business office of the registered agent will liability company, it is hereby confirmed that the confirmed tha	de, the Florida street address of the be identical. Or, in the case of a change(s) was/were authorized by r as otherwise provided in the articompany.	e registered office Florida limited an affirmative vote		
Jeremy Thompson	<del></del>			
(Printed or typed name of signee)  I hereby accept the appointment as registered age comply with the provisions of all statutes relative and I am familiar with and accept the obligations Chapter 108, I.S. Or if this document is being fill address, I hereby confirm that the limited liability	ent and agree to act in this capaci to the proper and complete perfor of my position as registered agent ed to merely reflect a change in the company has been notified in wri	ty. I further agree to mance of my duties, t as provided for in he registered office ting of this change.		
(Signature of Registered Agent)				

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