

MD8000002383

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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

APR 13 2010

EXAMINER

COVER LETTER

TO: Registration Section  
Division of Corporations


SUBJECT: Caribevision Station Group, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Angel Santamaria  
Name of Person

  
Firm/Company

13001 N.W. 107 Avenue  
Address

Hialeah Gardens, FL 33018  
City/State and Zip Code

angel.santamaria@cvnetwork.tv  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angel Santamaria at ( 305 ) 592-4141  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**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

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TALLAHASSEE, FLORIDA

**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: Caribevision Station Group LLC

2. (a) Principal office address of limited liability company: 13001 N.W. 107 Ave.

☒ (Note: **MUST BE STREET ADDRESS**) Hialeah Gardens, FL 33018

(b) Mailing address of limited liability company: P.O. Box 160340

☒ (Note: **MAY BE POST OFFICE BOX**) Hialeah, FL 33016

05/20/2008  
3. Date of filing/registration in Florida

M08000002383  
4. Document number

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

Registered Agent: Marcell Felipe

Registered Office Address: 1401 Brickell Avenue  
Suite 500  
Miami, FL 33131

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

**NEW Registered Agent:** Angel Santamaria

**NEW Registered Office Address:** 13001 N.W. 107 Avenue  
**(MUST BE FLORIDA STREET ADDRESS)** Hialeah Gardens, FL 33018

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.

Caribevision Holdings Inc Title MGRM  
Signature of a member or authorized representative of a member

[Signature]  
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.

[Signature]  
Signature of Registered Agent

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