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(((H20000038197 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : UNITED AGENT GROUP INC.

Account Number : 120160000086 Phone : (561)508-5033

Fax Number

: (561)694-1639

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| 73 | | | | | | | | | | | | | | |

Email Address:

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LLC REGISTERED AGENT CHANGE JM&A BRAZIL LLC

| Certificate of Status | 0 | | | |
|-----------------------|---------|--|--|--|
| Certified Copy | 0 | | | |
| Page Count | 02 | | | |
| Estimated Charge | \$25.00 | | | |

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

| 1. The name of the limited liability company is: JM&A | Brazil LLC | | | | | | |
|---|---|--|--|--|--|--|--|
| 2. (a) Principal office address of the limited liability company: | 100 JIM MORAN BLVD. | | | | | | |
| (Note: MUST BE STREET ADDRESS) | DEERFIELD BEACH FL 33442 | | | | | | |
| (b) Mailing address of limited liability company: | 100 JIM MORAN BLVD. | | | | | | |
| (Note: MAY BE POST OFFICE BOX) | DEERFIELD BEACH FL 33442 | | | | | | |
| 8/3/2010 | M10000003441 | | | | | | |
| 3. Date of filing/registration in Florida | 4. Document number | | | | | | |
| 5.(a) Registered Agent and Registered Office shown of | on the records of the Florida Dept. of State: | | | | | | |
| Registered Agent: | C T CORPORATION SYSTEM | | | | | | |
| Registered Office Address: | 1200 SOLITH PINE ISLAND ROAD S. | | | | | | |
| | PLANTATION FL 33324 | | | | | | |
| (b) Enter name of NEW Registered Agent and/or NEW Re | egistered Office address: | | | | | | |
| NEW Registered Agent: | United Agent Group Inc. | | | | | | |
| NEW Registered Office Address: | 801 US Highway 1 | | | | | | |
| (MUST BE FLORIDA STREET ADDRESS) | O | | | | | | |
| | North Paim Beach FL 33408 | | | | | | |
| or changes are made, the Florida street address of the registered | it is hereby confirmed that the change(s) was/were authorized by | | | | | | |
| (Printed or Typed name of signee) | | | | | | | |
| of all statutes relative to the proper and complete performance of my position as registered agent as provided for in Chapter 605, in the registered office address, I hereby confirm that the limited Joseph Panholzer | o act in this capacity. I further agree to comply with the provision of my duties, and I am familiar with and accept the obligations of F.S. Or, if this document is being filed to merely reflect a change liability company has been notified in writing of this change. Special Secretary | | | | | | |
| (Streature of Registered Agent) Division of Corporations, P.O. Be | ox 6327. Tallahassee, FL 32314 | | | | | | |
| INHS18(10/99) | | | | | | | |