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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : THE SCHIFFMAN LAW GROUP, P.A.
Account Number : I20000000100
Phone : (305) 682-1328
Fax Number : (305) 682-0063

****Enter the email address for this business entity to be used for future report mailings. Enter only one email address please.****

Email Address: _____

LLC REGISTERED AGENT CHANGE
MWG MARKETING, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01

B. BOSTICK

DEC 12 2013

EXAMINER

Estimated Charge	\$25.00
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2013 DEC 11 AM 10:09
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MWVG MARKETING, 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:

ADAM R. SCHIFFMAN, ESQUIRE

Name of Person

THE SCHIFFMAN LAW GROUP, P.A.

Firm/Company

2875 NE 191 STREET, SUITE 404

Address

AVENTURA, FL 33180

City/State and Zip Code

ADAM@REALATTY.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ADAM R. SCHIFFMAN, ESQUIRE at (305) 682-1328

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

2013 DEC 11 AM 10:10
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: MWG MARKETING, LLC
2. (a) Principal office address of limited liability company: 1101 Brickell Avenue
8th Floor
Miami, Florida 33131
 (Note: **MUST BE STREET ADDRESS**)
- (b) Mailing address of limited liability company: 2875 N.E. 181 Street
Suite 404
Aventura, Florida 33180
 (Note: **MAY BE POST OFFICE BOX**)
3. Date of filing/registration in Florida: May 5, 2012
4. Document number: M12000003068

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

Registered Agent:

RGPA REGISTERED AGENT CORP

Registered Office Address:

2601 S. BAYSHORE DRIVE, SUITE 725
MIAMI, FL 33133

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

NEW Registered Agent:

PREMIER BUSINESS MANAGEMENT, LLC

NEW Registered Office Address:

2875 N.E. 181 STREET

(MUST BE FLORIDA STREET ADDRESS)

SUITE 400

AVENTURA

FL 33180

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.

Signature of a member or authorized representative of a member

MARCELO CORDEIRO
 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 of Registered Agent

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