Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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LLC REGISTERED AGENT CHANGE EVEREST CAPITAL LLC

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N. CAUSSEAUX

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

Prinsipant 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.

L. Na	me of the limited liability commany:	the limited liability company: EVEREST CAPITAL LLC						
2, (a)	2601 Bayshore Drive Suite 1700		(Ъ)	2601 Bayshore Drive Saite 1700				
,,,	Principal office address of funited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of thnited liability company: (Note: MAY BE POST OFFICE BOX)				
	Miami, Florida 33 (33	<u> </u> 		Miami,	Florida 33133			
	2/28/2013		_	M13'0000	01312	·		
3.	Date of filing/registration in	Florida	4.		Document number			
5. (a)	CORPORATION SERVICE COM	PANY						
(a)	Registered Agent and Registered Office show	ud on the records of the	be Florida	Dept. of Stat	ic:			
	1201 HAYS STREET	1			F	د وب		
	Registered Office Address (MUST BE F.)	LORIDA STREET A	DDRESS)		~~	3		
						Æ		
	TALLAHASSEE	FL_	32301-	2525	_	9117 SEP -6 AM 8: 29		
/L*	Business Filings Incorporated							
(h)	Enter unue of NEW Registered Agent and/o	or NEW Registered	Office prici	C417;	-	=		
						ج ج		
	1200 South Pine Island Road				_	Š		
	NEW Registered Office Address:			-		-		
	Plantation	FI	33324		-			
the char agent w	mited liability company is not organizage or changes are made, the Florida vill be identical. Or, in the case of a Fire authorized by an affirmative vote occess of organization or the operating a	street address of t lorida limited lia of the members of	the regist bility con the him imited li	ered offic ipany, it is ted hability ability cor	cand the business office of the regists bereby confirmed that the change(sty company or as otherwise provided.	rered.		
Signat	the of a member or multiprized representative	of a member		704 01114	Printed or typed name of signee			
I hereb provision the oblinate to mere notified	ny accept the appointment as registere ons of all statutes relative to the prop- igations of my position as registered of the reflect a change in the registered of in writing of this change.	ed agent and agreer and agreer and complete pagent as provided office address. I had			actry, I finther agree to comply with duties, and I am familiar with and ac 5, F.S. Or, if this document is being t the limited liability company has be	file ecept filed in		
	o of Recistered Agent	ns! AVP: Business	Filings	lucorporat	ed			
D. STEWNI	Division of Corpo	 			ssee, FL 32314			
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