## M1300000 4817

(Re	questor's Name)				
(Address)					
(Address)					
(Cit	ry/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



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SECRETARY OF STATE STATE ON STATE ON SECRETARY OF CORPORATIONS

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MAY 0 3 2019

D. CLICLIBAN



CSC - WILMINGTON
251 Little Falls Drive "Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Logan Hall logan.hall@cscqlobal.com

Date: April 18, 2019

Order#: 731730-010

Re: SUNDANCE CHANNEL LATIN AMERICA LLC

Enclosed please find:

 $\frac{XX}{XX}$  Change of Registered Agent and Office.  $\frac{XX}{XX}$  Check in the amount of \$25.

•

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Logan Hall c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

SECRETARY OF STATE STATE OF CORPORATIONS
19 APR 22 AM 8: 19

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

Pursuant 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.

1. N	ame of the limited liability company: SUNDANCE CH	HANNEL	LATIN AMI	ERICA LLC	
2. (a)	11 PENN PLAZA		11 PEN	NN PLAZA	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(=)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	NEW YORK, NY 10001	_	NEW YO	PRK, NY 10001	
	08/01/2013		M130000	04817	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	CT CORPORATION SYSTEM				
, ,	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of State	!!	
	1200 SOUTH PINE ISLAND ROAD				
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)			
				; <u>ĕ</u>	
				· 三	
	PLANTATION .FL	33324		<b>B</b> 008	
				APR APR	
(b)	Corporation Service Company			22 C	
• •	Enter name of NEW Registered Agent and/or NEW Registered (	Office add	<u>ess</u> :	OR PC	
				₩ 003 8003	
	1201 Hays Street			e RAT	
	NEW Registered Office Address:		<del></del>	B 8: 19	
			<u> </u>	S	
	Tallahassee, FL_	32301			
the cha agent v was/we	mited liability company is not organized under the lawinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cles of organization or the operating agreement of the liability.	the regist bility con the limit	ered office ipany, it is ed liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
	/s/ Anne Kelly	Anne	Kelly, Auth	norized Person	
Signat	ure of a member or authorized representative of a member			Printed or typed name of signee	
provisii the obli to mere	by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address. I he is in writing of this change.	ee to act i performan for in Ch ereby cor	n this capa ace of my a apter 605, afirm that t	icity. I further agree to comply with the hities, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been	
Signatur	e of Registered Agent Corporation Service Company	BY: Gra	ce E. Kirl	by, Asst. Vice President	

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