M1300005278

(Re	equestor's Name)						
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificates o	f Status					
Special Instructions to Filing Officer:							

Office Use Only



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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Michael Rosenberg michael.rosenberg@cscglobal.com

Date: May 8, 2015

Order#: 613912-015

Re: SONOCLIPS DUBBING LLC

Enclosed please find:

XX Change of Registered Agent and Office.

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: Michael Rosenberg

c/o Corporation Service Company
2711 Centerville Road, Suite 400

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.

OUCA.XCOA

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.	Na	me of the limited liability company: SONOCLIPS DL	BBING	LLC			
2.	(a)		_ (b)			
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	Ŋ	Mailing address of limited lia (Note: MAY BE POST OF	bility con	npany:
		1001 Brickell Bay Drive, Suite 3104	_				
		Miami, FL 33131	_			<u>-</u>	
		08/21/2013		M130000	05278		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)				-		
		Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of State	2:		
		Interamerican Corporate Services LLC			-		
		Registered Office Address (MUST BE FLORIDA STREET A	<u>DDRESS</u>	2			
		2525 Ponce De Leon Blvd. Suite 1225			-		프
		Coral Gables , FL	33134	<u>.</u>	-	5 HAY	VS1817 VS1817
	(b)	Corporation Service Company				2	워크스 공화는
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	-	P	3.5€ Ciii
							[編., 表].
		1201 Hays Street			-	သ	i.
		NEW Registered Office Address:			_	-	71
		Tallahassee , FL	32301				
		, re	32301		-		
the ag wa	e cha ent v as/wa	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regi: bility co f the lim	stered office ompany, it is sited liability	e and the business office s hereby confirmed that y company or as otherw	e of the the cha	registered nge(s)
			Dor	na Priebe, A	uthorized Person		
	Signa				Printed or typed name of si		
pr the to	ovisi e obi mer	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ly reflect a change in the registered office address, I h d in writing of this change.	ee to act perform I for in G sereby c	t in this capt ance of my Chapter 605 onfirm that	acity. I further agree to duties, and I am familia 5, F.S. Or, if this docum the limited liability com	o comply or with a nent is b npany he	y with the ind accept eing filed as been
Si	gnatú	Section Corporation Service Company	BY: S	ylvia Quep	opet, Assistant Vice Pr	esident	: