m9800000001

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	Idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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13 FEB 15 PM 1: 02

B. BOSTICK
FEB 1 8 2013
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: MGM Network Name of L	s Latin Ameri	ca, LLC		
Dear Sir or Madam:				
The enclosed Registered Agent/Registered O	ffice Change and fee(s	s) are submitted for	filing.	
Please return all correspondence concerning t	his matter to the follo	wing:		
John Sharp			B 垒 云	
Name of Person			S FEE	-£j
Chello Latin America LLC			13 FEB 15	
Firm/Company			P	
300 Douglas Rd, north tower	10th floor		PM 1:02	
Address			1	
Coral Gables, Fl 33134				
City/State and Zip Code				
Jsharp@chellolatam.com				
E-mail address: (to be used for future annual	report notification)	•		
C.ud i. Cdi-ui dhia mattan	Nagan anti:			
or further information concerning this matter, p John Sharp		3-5239		
Name of Person	at (ime Telephone Num	 iber	
	•	· •		
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section Division of Corporations	Registration Section Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, l	Florida 32314		
Enclosed is a check for the following	g amount:			
□ \$25 Filing Fee	□ \$55 Filing	Fee & Certified Cor	nv	

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: MGM Networks Latin.	America, LLC			
2 (a) Principal office address of limited liability common	SON DOLICI AS DOAD			
 (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS) 	NORTH TOWER, 10TH FLOOR			
	CORAL GABLES FL 33134 US			
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
07/28/1998	M98000001011			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on	the records of the Florida I	Dept. of State:		
Registered Agent:	MELVIN PEREZ			
Registered Office Address:	800 DOUGLAS ROAD	>>		
Registered Office Address.	NORTH TOWER, 10TH FLOOR	- 100 - 100	-11	
	CORAL GABLES FL 33134 US	G2 CD	lb-same	
		14	<u></u>	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office addr	ess:	5	
NEW Registered Agent:	CORPORATION SERVICE CORPORA	- 2 - 2		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street			
(MOST BE PEORIDA STREET ADDRESS)	Tallahassee	,FL 32301		
f the limited liability company is not organized under the confirmed that after the change or changes are made, the Fund the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwishe operating agreement of the limited liability company. Generally agreement of the limited liability company of the provisions of all statutes relative to the provision of all statutes relative to the provision of all statutes relative to the provision of the limited liability company of the provision of the limited liability company of the provision of the limited liability company.	lorida street address of the ical. Or, in the case of a Fl was/were authorized by an se provided in the articles of a provided in the articles of the capacity. The provided in this capacity, oper and complete perform sition as registered agent a rely reflect a change in the whas been notified in writing.	registered office lorida limited a affirmative voor of organization	ote of or	
Holly Jones, Assistant V Signature of Registered Agent	r			
Division of Corporations, P.O. Box 63	27_Tallahassee_FL 3231	4		
FILING FEE: \$2		-		

INHS18 (05/08)