

m98000001412

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

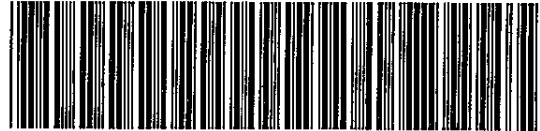
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1/12 R/A change

m98-1412

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04 JAN 12 PM 12:55
TALLAHASSEE, FLORIDA



12631 East Imperial Highway
Suite D-116
Santa Fe Springs, CA 90670

Phone: (800) 486-0757
Fax: (800) 486-0859
Web: www.crslink.com

January 6, 2004

VIA US REGULAR MAIL

Florida Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: **Sigue LLC**

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida of State:

1. One original (1) and one (1) copy of Change of Registered Agent/Address form;
2. \$25.00 to cover the required filing fee; and
3. A self-address, stamped envelope.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned in the enclosed envelope provided for your convenience.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (562) 465-0020.

Respectfully,

CORPORATE RESEARCH SOLUTIONS, INC.

A handwritten signature in cursive script, appearing to read "Alondra Navarro".

Alondra Navarro.

**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. The name of the limited liability company is: Sigue, LLC
2. The mailing address of the limited liability company is : 2533 N. Carson Street Carson City NV 89706

- 11/18/1998 M98000001412
3. Date of filing/registration in Florida 4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

NRAI Services, Inc.
Name
526 E. Park Avenue
Address
Tallahassee, FL 32301
City, State and Zip

6. The name and address of the new registered agent and/or office:

Corporate Research Solutions, Inc.
Name
1333 N. Duval Street
Florida street address (P.O. Box NOT acceptable)
Tallahassee, FL 32303
City, State and Zip

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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.

Guillermo de la Vina
(Signature of a member or authorized representative of a member)

Guillermo de la Vina
(Printed or typed name of signee)

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. On 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.

Michael Orey, Secretary
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314