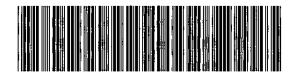
N99088004486

(Requestor's Name)				
(Address)				
	·			
(Address)				
(Cit	ty/State/Zip/Phone	<i>⇒</i> #)		
PICK-UP	MAIT	MAIL.		
(Business Entity Name)				
(Document Number)				
(LX.	cument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
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06/19/09--01043--016 **35.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

R.A. Change C.COULLIETTE

JUN 23 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations	3	
SUBJECT: The Sobe Ro	oom, Inc.	
***************************************	(Name of C	Corporation)
DOCUMENT NUMBER: N99	9000004486	
The enclosed Statement of Chang	ge of Registered Offic	e/Agent and fee are submitted for filing.
Please return all correspondence	concerning this matte	r to the following:
Matt Tho	mpson	
	(Name of Co	ntact Person)
National	Registered Ag	
	(Firm/Co	ompany)
11600 Col	lege Boulevard, (Add	
Overland F	ark, KS 66210	
	(City/State a	• •
For further information concernir	ng this matter, please	call:
Matt Thomp	son	at (800) 550-6724
(Name of Contact		at (800) 550-6724 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made	payable to the Depart	tment of State.
Division P.O. Bo	Address: nent Section a of Corporations ax 6327 see, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

i. Ine name of t	he corporation:	The Sobe Room, Inc.	
2. The principal	office address: 1718 Bay Road		
Miami Bea	ach, FL 33139		
3. The mailing a	ddress (if different): 821 Jefferso	n Ave. #4	
Miami Be	ach, FL 33139		
4. Date of incorp	oration/qualification: 07/28/1999	Document number: N99	9000004486
5. The name and Florida Depart	street address of the current registers transfer of State:	ed agent and registered office on file	e with the
	Wood, Larry M		<u></u>
	1850 Meridian Ave. #15		. *
	Miami Beach, FL 33139		O9 JU
6. The name and (if changed):	street address of the new registered a	agent (if changed) and /or registered	SS SS
	NRAI Services, Inc.		
	2731 Executive Park Driv	ve, Suite 4	0: 38 0: 38 1:0RI
	(P.O. Box NOT accep	itable)	— HDA 11E 80
	Weston, FL 33331		
The street address s changed will	ss of its registered office and the str be identical.	reet address of the business office	of its registered agent,
Such change was	s authorized by resolution duly ado board, or the corporation has been	opted by its board of directors or by n notified in writing of the change.	y an officer so
J. Me	re of an officer of director)	(Printed or typed name	Smith Assila
f my duties, and locument is bein	the appointment as registered agen to comply with the provisions of all. I I am familiar with and accept the ng filed merely to reflect a change i been notified in writing of this char M.	obligation of my position as registing the registered office address. I h	complete performance tered agent. Or, if this ereby confirm that the
y stat The	nature of Registered Agent)	06/15/200	7

* * * FILING FEE: \$35.00 * * *

COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: The Sobe Room, Inc. (Name of Corporation)					
DOCUMENT NUMBER: N99000004486					
The enclosed Statement of Change of Registered Office/Agent an	d fee are submitted for filing.				
Please return all correspondence concerning this matter to the foll	owing:				
Matt Thompson	•••				
(Name of Contact Perso	on)				
National Registered Agents, Inc.					
(Firm/Company)	<u> </u>				
11600 College Boulevard, Suite 210 (Address)					
Overland Park, KS 66210 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Matt Thompson at (800 (Are	0 550-6724 ea Code & Daytime Telephone Number)				
Enclosed is a \$35.00 check made payable to the Department of State.					
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•	provisions of sections 607.0502, 617.0502, 6 inge is submitted for a corporation organized		
=	r to change its registered office or registered		
1. The name of t	the corporation:	The Sobe Room, Inc.	· · · · · · · · · · · · · · · · · · ·
2. The principal	office address: 1718 Bay Road		W
Miami Be	ach, FL 33139		
3. The mailing a	ddress (if different): 821 Jefferson Ave	. #4	·
Miami Be	ach, FL 33139		···
4. Date of incom	poration/qualification: 07/28/1999	Document number: N9900	00004486
	I street address of the current registered agent transfer of State:	at and registered office on file wit	h the
	Wood, Larry M		- 249
	1850 Meridian Ave. #15		SEC
	Miami Beach, FL 33139		RETA AHAM
6. The name and (if changed):	street address of the new registered agent (i	if changed) and /or registered offi	P ANIO:
	NRAI Services, Inc.		. Σ > ω
	2731 Executive Park Drive, S	uite 4	NOA NOA
	(P.O. Box NOT acceptable) Weston, FL 33331		
The street addre	ess of its registered office and the street add be identical.	dress of the business office of it	s registered agent,
Such change wa	as authorized by resolution duly adopted by board, or the corporation has been notifi	y its board of directors or by an	officer so
J.M.	we of an officer by director)	(Printed or typed name and t	nith Assr / Reas
, , ,	the appointment as registered agent and a to comply with the provisions of all statute, d I am familiar with and accept the obliga ng filed merely to reflect a change in the re s been notified in writing of this change.		
Matt Thom	gnature of Registered Agent) DSON, Assistant Secretary thalf of an entity:	06/15/2009 (Date)	
Matt	Thomas on		

* * * FILING FEE: \$35.00 * * *