

Nov. 19, 2012 5:25 PM

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Florida Department of State
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Account Number : I20090000078
Phone : (561) 515-2930
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Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

2. The principal office address: 3780 SHORE DRIVE, VIRGINIA BEACH, VA 23455

3. The mailing address (if different): 3780 SHORE DRIVE, VIRGINIA BEACH, VA 23455

4. Date of incorporation/qualification: 11/22/10 Document number: F10000005201

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

ROGER C. STANTON, ESQ.

712 US HIGHWAY ONE, SUITE 400

NORTH PALM BEACH, FL 33408

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

PAUL A. KRASKER, ESQ.

501 S. FLAGLER DRIVE, SUITE 201

P.O. Box NOT acceptable

WEST PALM BEACH, FL 33401

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature] JAMES M. ARNHOLD
 Signing official or director Printed or typed name and title

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 agree to accept the terms of the registered agent agreement. If this document is henceforth used to request a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Signature of Registered Agent _____ Date _____

If signing on behalf of an entity:

Type of Printed Name

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MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
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