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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: Pro Touch,	LLC	
2. (a) Principal office address of limited liability com	npany: 2595 Canyon Blvd Suit	e 240,
(Note: MUST BE STREET ADDRESS)	Boulder, Colorado 80302	
(b) Mailing address of limited liability company:	2595 Canyon Blvd Suite 240,	
(Nate: MAY BE POST OFFICE BOX)	Boulder, Colorado 80302	
2/22/2005	L05000017962	
3. Date of filing/registration in Florida	4. Document number	· · ·
5. (a) Registered Agent and Registered Office shows	n on the records of the Florida Dep	at. of State:
Registered Agent:	Carlos Garcia	<u> </u>
Registered Office Address:	3141 Commerce Parkway	85
Tegmenta Chita Lindiani	Miami, Florida 33025	in the
(b) Enter name of NEW Registered Agent and/or	r NEW Registered Office address	
NEW Registered Agent:	Business Filings Incorporated	1 7 %
NEW Registered Office Address:	515 E. Park Avenua,	
<u>(MUST BE FLORIDA STREET ADDRESS)</u>	Tallahassee	FL 32301
If the limited liability company is not organized under confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the char of the members of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company.	the Florida street address of the reg identical. Or, in the case of a Flori nge(s) was/were authorized by an a otherwise provided in the articles of	gistered office ida limited ffirmative vote
Carlos Garcia Printed or typed name of signee		
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of the Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability confirm that the limited Registered Agent		further agree to ce of my duties, provided for in gistered office of this change.

Division of Corporations, P.O. Box 6327, Tallahassec, FL 32314 FILING FEE: \$25.00

INHS18 (05/08)

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