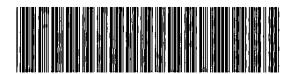
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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Strategic Asset Management Broup, LLC (Name of Limited Liability Company)			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:			
RICHARDA. RATNEZ (Name of Person)	. <u> </u>		
Strutegic Asset Management Claup, LLC (Firm/Company)			
595 S. Federal Highway Suite 600			
(Address)			
BOCQ BUTON, FL 33432			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Richard A. Ratwer at (Name of Person)	(Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:			
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

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:	Flutegic Asset Management.
2. The mailing address of the limited liability com	GROLP, UC
595 S. Felleal Highway	y, Suite 600, Boca Roton, Fl 33432
8/24/07	y, Suite 600, Boca Reton, FL 33432 207000086735
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the register Florida Department of State:	
369 W. Coed	Name Carver
	Address CH, FL 33445 State and Zip All State and Zip
	1. Ratner =
	POLDECT VICT 904 (P.O. Box NOT acceptable)
Deleay Beach,	FL 33484
•	ate and Zip
If the limited liability company is not organized un	nder the laws of the State of Florida, it is hereby

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.

(Signature of a member or authorized representative of a member)

Richard A. Rather

(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. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby can that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)