L10000084500

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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

JAN 20 2016
J. HARRIS

# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

*Pursuant to the provisions of sections 605.0114 or 605.0116, 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: The Ashlar Group LLC

2. (a) 135 West 29th Street, Suite 1102
New York, NY 10001
Principal office address of limited liability company:
(*Note: MUST BE STREET ADDRESS*)

(b) 135 West 29th Street, Suite 1102
New York, NY 10001
Mailing address of limited liability company:
(*Note: MAY BE POST OFFICE BOX*)

3. August 12, 2010
Date of filing/registration in Florida

4. L10000084500
Document number

5. (a) Incorp Services, Inc.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
17888 67th Court North
Registered Office Address (*MUST BE FLORIDA STREET ADDRESS*)
17888 67th Court North
Loxahatchee, FL 33470

(b) Vcorp Services, LLC
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
Vcorp Services, LLC
**NEW** Registered Office Address:
5011 South State Road 7, Suite 106
Davie, FL 33314

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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.

Signature of a member or authorized representative of a member

Ruben Sutton
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 605, F.S. Or, 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.*

Signature of Registered Agent

**Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314**
**FILING FEE: $25.00**

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