Division of Corporations Electronic Filing Cover Sheet

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LLC REGISTERED AGENT CHANGE AAG UNLIMITED, LLC

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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 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.	Na	me of the limited liability company: AAG Unlimited	d, LLC					
2. {	a)	100 S Eola Drive Ste 1110	(b) 12657 Alcosta Blvd. Suite 500					
~ . (, ,	Principal office address of firmited liability company: (Note: MUST BE STREET ADDRESS)	_ (Nailing address of limitor (Nate: MAY BE POS			<i>y</i> :
		Orlando, FL 32801	_	San Ran	non, CA 94583		·	
		07/24/2014		L1400011	6846			
3.		Date of filing/registration in Florida	4.		Document number			
5 .	(a)	CORPORATION SERVICE COMPANY						
٠,	(#/	Registered Agent and Registered Office shown on the records of the 1201 HAYS STREET	he Florid	a Dept. of State	· ::			
		Registered Office Address (MUST BE FLORIDA STREET A	DDRES	20		- 654		
		TALLAHASSEE	32301	· · · · · · · · · · · · · · · · · · ·		ALLAH	17 JUN 2	£
ĺ	(b)	eResidentAgent, Inc.				AHASSE	27	
		Enter name of NEW Registered Agent and/or NEW Registered	Office R	idress:		C C	至	
		236 E 6th Ave.		<i>.</i> `		1017 18	t. Ö	
		NEW Registered Office Address:			•	NOA	Ď	
		Tallahassee	32303	-	•			
		, FL		<u></u>	-			
the age was	cha nt v s/w	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the reg shility of f the lin limited	istered office company, it is nited liability Jiability con	e and the business of s hereby confirmed y company or as oth	ffice of that the c	he regi :bange	stered (s)
- -	ione	ture of a member or authorized representative of a member	Er	ika Easter	Printed or typed name	ofsience		
I h pro the to t not	ere vişi obi ner ifle	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I to din writing of this change.	ee to ac perform d for in hereby (ot in this cap nance of my Chapter 602 confirm that		•	ply wi h and is being has b	th the accept Tiled een