| Entity Name  | NC. Secretary of State<br>CC1815000775  |                          |   |  |  |
|--|---|--------------------------|---|--|--|
| Current Principal Place of Business:   |   |                          |   |  |  |
| 1353 HOLLY HI  | •   |                          |   |  |  |
| FORT LAUDER  | DALE, FL 33304  |                          |   |  |  |
|  |   |                          |   |  |  |
| Current Mailing Address:   |   |                          |   |  |  |
|  | ' HEIGHTS DR  |                          |   |  |  |
|  |   |                          |   |  |  |
| FORTLAUD   | ERDALE, FL 33304 US   |                          |   |  |  |
| FEI Number   | : 20-5112743  |                          | Certificate of Status Desired: No                           |  |  |
| Name and Address of Current Registered Agent:  |   |                          |   |  |  |
| NEEB, VOLKM  |   |                          |   |  |  |
| 2317 NW 7 AVE<br>WILTON MANC   | -<br>PRS, FL 33311 US   |                          |   |  |  |
|  |   |                          |   |  |  |
| The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. |   |                          |   |  |  |
|  | ,   | J                        | torou ugona, or boar, in the otate or rionau                |  |  |
| SIGNATURE  | VOLKMAR NEEB  |                          | 02/23/2015  |  |  |
| SIGNATURE  | Electronic Signature of Registered Agent  |                          | <b>u</b>  |  |  |
| SIGNATURE<br>Officer/Dire  | Electronic Signature of Registered Agent  |                          | 02/23/2015  |  |  |
|  | Electronic Signature of Registered Agent  | Title                    | 02/23/2015  |  |  |
| Officer/Dire   | Electronic Signature of Registered Agent  |                          | 02/23/2015<br>Date  |  |  |
| Officer/Dire   | Electronic Signature of Registered Agent<br>ctor Detail :<br>PRESIDENT, TREASURER   | Title                    | 02/23/2015<br>Date  |  |  |
| Officer/Direc<br>Title<br>Name<br>Address  | Electronic Signature of Registered Agent<br>ctor Detail :<br>PRESIDENT, TREASURER<br>NEEB, VOLKMAR  | Title<br>Name<br>Address | 02/23/2015<br>Date<br>DV<br>FRANZEN, JOHN                   |  |  |
| Officer/Direc<br>Title<br>Name<br>Address  | Electronic Signature of Registered Agent<br>ctor Detail :<br>PRESIDENT, TREASURER<br>NEEB, VOLKMAR<br>2317 NW 7 AVE   | Title<br>Name<br>Address | 02/23/2015<br>Date<br>DV<br>FRANZEN, JOHN<br>508 NW 20TH ST |  |  |
| Officer/Dire<br>Title<br>Name<br>Address<br>City-State-Zip:  | Electronic Signature of Registered Agent<br>ctor Detail :<br>PRESIDENT, TREASURER<br>NEEB, VOLKMAR<br>2317 NW 7 AVE<br>WILTON MANORS FL 33311   | Title<br>Name<br>Address | 02/23/2015<br>Date<br>DV<br>FRANZEN, JOHN<br>508 NW 20TH ST |  |  |
| Officer/Dire<br>Title<br>Name<br>Address<br>City-State-Zip:<br>Title   | Electronic Signature of Registered Agent<br>ctor Detail :<br>PRESIDENT, TREASURER<br>NEEB, VOLKMAR<br>2317 NW 7 AVE<br>WILTON MANORS FL 33311<br>DS                                     | Title<br>Name<br>Address | 02/23/2015<br>Date<br>DV<br>FRANZEN, JOHN<br>508 NW 20TH ST |  |  |
| Officer/Dire<br>Title<br>Name<br>Address<br>City-State-Zip:<br>Title<br>Name   | Electronic Signature of Registered Agent<br>ctor Detail :<br>PRESIDENT, TREASURER<br>NEEB, VOLKMAR<br>2317 NW 7 AVE<br>WILTON MANORS FL 33311<br>DS<br>SPIEK, DENNIS<br>158 N MCKEAN ST | Title<br>Name<br>Address | 02/23/2015<br>Date<br>DV<br>FRANZEN, JOHN<br>508 NW 20TH ST |  |  |
| Officer/Dire<br>Title<br>Name<br>Address<br>City-State-Zip:<br>Title<br>Name<br>Address  | Electronic Signature of Registered Agent<br>ctor Detail :<br>PRESIDENT, TREASURER<br>NEEB, VOLKMAR<br>2317 NW 7 AVE<br>WILTON MANORS FL 33311<br>DS<br>SPIEK, DENNIS<br>158 N MCKEAN ST | Title<br>Name<br>Address | 02/23/2015<br>Date<br>DV<br>FRANZEN, JOHN<br>508 NW 20TH ST |  |  |
| Officer/Dire<br>Title<br>Name<br>Address<br>City-State-Zip:<br>Title<br>Name<br>Address  | Electronic Signature of Registered Agent<br>ctor Detail :<br>PRESIDENT, TREASURER<br>NEEB, VOLKMAR<br>2317 NW 7 AVE<br>WILTON MANORS FL 33311<br>DS<br>SPIEK, DENNIS<br>158 N MCKEAN ST | Title<br>Name<br>Address | 02/23/2015<br>Date<br>DV<br>FRANZEN, JOHN<br>508 NW 20TH ST |  |  |
| Officer/Dire<br>Title<br>Name<br>Address<br>City-State-Zip:<br>Title<br>Name<br>Address  | Electronic Signature of Registered Agent<br>ctor Detail :<br>PRESIDENT, TREASURER<br>NEEB, VOLKMAR<br>2317 NW 7 AVE<br>WILTON MANORS FL 33311<br>DS<br>SPIEK, DENNIS<br>158 N MCKEAN ST | Title<br>Name<br>Address | 02/23/2015<br>Date<br>DV<br>FRANZEN, JOHN<br>508 NW 20TH ST |  |  |

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0600006006

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

| SIGNATURE: VOLKMAR NEEB | PRES | 02/23/2015 |
|-------------------------|------|------------|
|                         |      |            |

Electronic Signature of Signing Officer/Director Detail

Date

FILED Feb 23, 2015