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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES P. SACHER

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

01/05/2015

Date

Entity Name: CHARLES P. SACHER, P.A.

Current Principal Place of Business:

2655 LEJEUNE ROAD 1101 GABLES INTERNATIONAL PLAZA CORAL GABLES, FL 33134

Current Mailing Address:

DOCUMENT# 643973

2655 LEJEUNE ROAD 1101 GABLES INTERNATIONAL PLAZA CORAL GABLES, FL 33134

FEI Number: 59-1945322

Name and Address of Current Registered Agent:

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

SACHER, CHARLES P 2655 LEJEUNE RD CORAL GABLES, FL 33134 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.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PDS	Title	VPAS
Name	SACHER, CHARLES P ESQ	Name	SACHER, CHARLES PVP AS
Address	2655 LEJEUNE RD	Address	2655 LEJEUNE RD
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134

FILED Jan 05, 2015 Secretary of State CC3542907487

Certificate of Status Desired: No

Date