I hereby certify that the information indicated on this report or supplemental report is true and accur	rate and that my electronic signature shall have the sa	ame legal effect as if made under
oath; that I am an officer or director of the corporation or the receiver or trustee empowered to exec	cute this report as required by Chapter 607, Florida Si	atutes; and that my name appears
above, or on an attachment with all other like empowered.		
SIGNATURE: NORMA FANTINO	PRESS	12/15/2014

DPS Title Title VICE PRESIDENT Name FANTINO, NORMA B Name KIPERSHMIT, CARLOS A VP Address 3500 MYSTIC POINTE DR STE 1104 Address 3500 MYSTIC POINTE DR STE 1104 City-State-Zip: AVENTURA FL 33180 City-State-Zip: AVENTURA FL 33180

SIGNATURE:

Officer/Director Detail :

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.

Name and Address of Current Registered Agent:

FANTINO, NORMA B 3500 MYSTIC POINTE DR STE 1104 AVENTURA, FL 33180 US

2014 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P09000042874

Entity Name: FOUR L GROUP, CORP.

Current Principal Place of Business:

3500 MYSTIC POINTE DR STE 1104 AVENTURA, FL 33180

Current Mailing Address:

3500 MYSTIC POINTE DR STE 1104 AVENTURA, FL 33180

FEI Number: 27-0186220

Electronic Signature of Registered Agent

FILED Dec 15, 2014 Secretary of State CC1096113916

Date

Certificate of Status Desired: No

Electronic Signature of Signing Officer/Director Detail