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 it made under
oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and
that my name appears above, or on an attachment with all other like empowered.

SIGNATURE:	SIGNATURE: JOE R. PRICE			MGRM	04/16/2013

DOCUMENT# L10000084691

Entity Name: JOE R. PRICE & ASSOCIATES, LLC

### **Current Principal Place of Business:**

224 CANTERBURY DR. W PALM BEACH GARDENS, FL 33418

# **Current Mailing Address:**

224 CANTERBURY DR. W PALM BEACH GARDENS, FL 33418 US

# FEI Number: 90-0600541

## Name and Address of Current Registered Agent:

FLORIDA INCORPORATOR 619 CATTLEMEN ROAD SUITE O11 SARASOTA, FL 34232 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: MICHAEL ANGELO

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

TitleMGRMNamePRICE, JOE RAddress224 CANTERBURY DR. WCity-State-Zip:PALM BEACH GARDENS FL 33418

Certificate of Status Desired: No

04/16/2013 Date

Date

### FILED Apr 16, 2013 Secretary of State CC8651356927

Electronic Signature of Signing Authorized Person(s) Detail