that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MORTEN AAVIK

Electronic Signature of Signing Authorized Person(s) Detail

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000121502

Entity Name: AM GROUP MIAMI, LLC

Current Principal Place of Business:

3250 NE 1ST AVE 703 MIAMI, FL 33137

Current Mailing Address:

3250 NE 1ST AVE 703 MIAMI, FL 33137 US

FEI Number: 90-0635032

Name and Address of Current Registered Agent:

JAETMA, MART 3250 NE 1ST AVE 703 MIAMI, FL 33137 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: MART JAETMA

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MGRM	
Name	AAVIK, MORTEN	
Address	3250 NE 1ST AVE #703	
City-State-Zip:	MIAMI FL 33137	

	MEMBER	04/28/2014
ized Person(s) Detail		Date

Certificate of Status Desired: No

04/28/2014 Date

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

FILED Apr 28, 2014 Secretary of State CC2744887925