**Entity Name:** WIKING ASSETS, LLC

**Current Principal Place of Business:**
1180 SW 36TH AVENUE, SUITE 100
POMPANO BEACH, FL 33069

**Current Mailing Address:**
1180 SW 36TH AVENUE, SUITE 100
POMPANO BEACH, FL 33069

**FEI Number:** 37-1664542

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

**Authorized Person(s) Detail:**

<table>
<thead>
<tr>
<th>Title</th>
<th>Name</th>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>MGR</td>
<td>SAMUEL, JAN-ERIC</td>
<td>43 SOUTH POMPANO PKWY PMB 112</td>
</tr>
</tbody>
</table>

City-State-Zip: POMPANO BEACH FL 33069

**Signature:** JAN-ERIC SAMUEL
**Manager:** 03/18/2013

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

**SIGNATURE:** JAN-ERIC SAMUEL
**Electronic Signature of Signing Authorized Person(s) Detail**

**Date:** 03/18/2013