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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

RAROICH8 10,4.8.15 March 27, 2015

VIA US MAIL

Florida Department of State Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: NNNET ADVISORS, INC.

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida Secretary of State:

- 1. One original (1) and one (1) copy of Change of Registered Agent/Address form;
- 2. \$35 Corp to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (888) 705-7274.

Respectfully,

Leana Guzman REGISTERED AGENT SOLUTIONS, INC. 1701 Directors Blvd., Suite 300 Austin, TX 78744

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	he provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida St hange is submitted for a corporation organized under the laws of the State of \underline{C} der to change its registered office or registered agent, or both, in the State of Fl	alifornia
1. The name of	of the corporation: NNNET ADVISORS INC	
2. The principal	Pal office address: 649 4TH AVE RANCISCO, CA 94118	
3. The mailing a	g address (if different): N/A	
4. Date of incorp	orporation/qualification: 05/18/2012 Document number: F12000	002122
	and street address of the current registered agent and registered office on file with partment of State: (If resigned, enter resigned)	OIVISION OF CHARY
	C T CORPORATION SYSTEM	智器
	1200 SOUTH PINE ISLAND ROAD	300
	PLANTATION, FL 33324	FRIAM.
6. The name and (if changed):	and street address of the new registered agent (if changed) and /or registered office):	
	REGISTERED AGENT SOLUTIONS, INC.	
	155 Office Plaza Dr. Suite A	
	P.O. Box NOT acceptable Tallahassee, FL 32301	
The street addre	dress of its registered office and the street address of the business office of its rill be identical.	registered agent,
Such change was authorized by th	was authorized by resolution duly adopted by its board of directors or by an of the board, or the corporation has been notified in writing of the change.	ficer so
Signatu	GEOFFREY FAULKENER, P	RESIDENT
I hereby accept I further agree to performance of agent. Or, if the	pt the appointment as registered agent and agree to act in this capacity. e to comply with the provisions of all statutes relative to the proper and comp of my duties, and I am familiar with and accept the obligation of my position a this document is being filed merely to reflect a change in the registered office m that the corporation has been notified in writing of this change.	is registered
Jaclyn Sign	1 Wight Asst. Sec. 3/21/2015 Signature of Rigistered Agent	
If signing on be	pehalf of an entity:	•
	ED AGENT SOLUTIONS, INC. Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

* * * FILING FEE: \$35.00 * * *