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To:

Division of Corporations

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ALLAND STORY

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone

: (307)200-2803

Fax Number

; (855)330-1010

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Email	Address:	

LLC REGISTERED AGENT CHANGE PE-WO OF NAPLES, LLC

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STATEMENT OF CHANGE OF REGISTERED OFFICE OF REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of

rioria	3.	- ()	1 110				
1. Na	nme of the limited liability company: PE-W	O of Na	aples, LLC				
2. (a)			(b)				
(u) .	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	1400 Brigadoon Ct		5697 Goshawk Rdg				
	Traverse City MI 49686		Traverse City MI 49684				
	12/22/2000		L0000016020				
3.	Date of filing/registration in Florida	4.	Document number				
5. (a)	CLASP, INC.						
J. (u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:						
	3001 TAMIAMI TRIAL N						
	Registered Office Address (MUST BE FLORIDA STR	<u> </u>					
	SUITE 400						
	Naples	_{FL} 34103	22				
(b)	Northwest Registered Ager	nt LLC					
(0)	Enter name of NEW Registered Agent and/or NEW Regis	eddmice:					
	7901 4th St N	2 T					
	NEW Registered Office Address:						
	STE 300						
	St. Petersburg)2					
the character agent was/w	ange or changes are made, the Florida street addre	ess of the regi ited liability c bers of the lin of the limited					
Morgan Polle			Morgan Noble				

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Printed or typed name of signee

on Glover - Assistant Secretary

Signature of a member or authorized representative of a member

Signature of Registered Agent