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(City/State/Zip/Phone #)
VSM Holdings 211 W-Hibisuns Blud Melbourne, FL 32901
(Document Number)
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited iability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
. The name of the limited liability company is: VSM Holdings LLC
2. The mailing address of the limited liability company is: 305 Wilson Ave Satellite Beach, FL 32937
3/17/03 403000009644
Date of filing/registration in Florida 4. Document number
The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
The name and address of the new registered agent and/or office: Vipacharee M-Weil 211 W. Hibiscus Blvd. Florida street address (P.O. Box NOT acceptable) Melbourne, FL 32901 City, State and Zip
onfirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member)
Scott T. M=Nei
Printed or typed name of signee) I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to omply with the provisions of all statutes relative to the proper and complete performance of my duties, may be a few with and accept the obligations of my position as registered agent as provided for in independent of the property of the provided for in independent of the property reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. Signifure of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00