104000005794

(Re	questor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





200234976522

05/14/12--01025--016 **25.00

2012 HAY IL AM 9: 32

J. SAULSBERRY EXAMINER MAY 16 2012

COVER LETTER

CLIDIDOD	^	Mining Group I	10			
SUBJECT:		Mining Group, L Limited Liability Cor			_	
Dear Sir or Madam:						
The suctored Designation	d A	066 - 01	-(-) t t4 f	Ct1:		
The enclosed Registered	a Agent/Registered	Office Change and re	e(s) are submitted for i	ming.		
Please return all corresp	ondence concernin	g this matter to the fo	llowing:			
Bri	an P Schreiber					
	ame of Person					
	ning Group, LLC			AH	2012	
F	rm/Company			RETA AHAS	2012 MAY 14	
F	O Box 1829				+	
	Address			77.00 21.00		
·				₽X	မှ	-
Lake	City, FL 32056			E F	3 2	
	State and Zip Code			•		
brian.schreiber E-mail address: (to be use	@andersoncolun	nbia.com notification)				
For further information	concerning this ma	tter, please call:				
Brian Sc	hreiber	at (386)	785-7585			
Name of Pe			de & Daytime Telephone Nun	nber	_	
STREET/COUR Registration Section Division of Corportion Building 2661 Executive Contact Tallahassee, Flori	on orations enter Circle	Registratio Division of P.O. Box 6	f Corporations			
Enclosed is a cl	eck for the follow	ing amount:				
\$25 Filing Fe	e	\$55 Filin	g Fee & Certified Cop	у		

INHS18 (5/08)

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 liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company:	A Mining Group, LLC			
2. (a) Principal office address of limited liability company	y: 871 NW Guerdon St			
(Note: MUST BE STREET ADDRESS)	Lake City, FL 32055			
(b) Mailing address of limited liability company:	871 NW Guerdon St			
(Note: MAY BE POST OFFICE BOX)	Lake City, FL 32055			
11/22/2004	L0400005794			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:			
Registered Agent:	MCRAE & METCALF, P.A.			
Registered Office Address:	871 NW GUERDON ST			
	Lake City, FL 32055			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address			
NEW Registered Agent:	Brian P Schreiber			
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	871 NW Guerdon St			
	Lake City 32055			
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	lorida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization			
Brian P Schreiber Printed or typed name of signee	-			
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pround I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.			

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