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COVER LETTER

	gistration Section vision of Corporations					
Subject: Subjection Technology Group LLC						
SUBJECT	Name of Limited Liability Company					
Dear Sir o	r Madam:					
The enclos	ed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.			
Please retu	rn all correspondence concerning	g this matter to the f	ollowing:			
Linda K. D	avis					
	Name of Person					
Law Office	of Linda K. Davis, P.A.					
	Firm/Company		_			
Post Office	Box 100					
	Address		- -			
Fort Laude	rdale, FL 33302					
	City/State and Zip Coo	le				
LKDavis@	LindaKDavisLaw.com					
E-ma	ill address: (to be used for future	annual report notifi	cation)			
For further	information concerning this ma	tter, please call:				
Linda K. D	avis	954 at (524-2280			
	Name of Person	(Area Code & Daytime Telephone Number			
Ri Di P.	ailing Address: Egistration Section Evision of Corporations O. Box 6327 Ellahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, F1, 32303			
Ei	nclosed is a check for the follow	ing amount:				
3	\$25 Filing Fee	U \$5	5 Filing Fee & Certified Copy			

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR 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 Florida.

I. Na	ame of the limited liability company: Sabertooth Techn	nology Grou	ip LLC		
2. (a)	7957 North University Drive, #201, Parkland, FL 33067	(h)	7957 North	University Drive, #201	, Parkland, FL 33067
<u>.</u> . (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			failing address of limited l (Note: MAY BE POST)	
	1/1-4/2009		.090XXXXX	01	
3.	Date of filing/registration in Florida	4.	1	Document number	
5. (a)					
	Registered Agent and Registered Office shown on the records o	:			
	633 SE 3rd Avenue, Suite 202		··		
	Registered Office Address (MUST BE FLORIDA STREET	<u> (ADDRESS)</u>			
					•
	Fort Lauderdale	L 33301			•
(b)	Law Office of Linda K, Davis, P.A.				k j
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office add	ress:		
	NEW Registered Office Address:				• •
	533 NE 3rd Avenue, Suite R-1				
				,	
	Fort Lauderdale	33301			
change agent v was/w	fimited liability company is not organized under the la e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited le ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registered iability cor of the limi a limited lia	I office and npany, it is ted liability ability com	I the business office of hereby confirmed that company or as other pany.	f the registered it the change(s)
<u> </u>		Sanje ——	ev Lalchand		
	nure of a member or authorized representative of a member	man to set	ta dala can	Printed or typed name of	
provisi the obj to mer	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	e performa.	nce of my d	luties, and Lam famili	ar with and accept
M		Office C	F LIND	A K. DAVIS, P.	1.