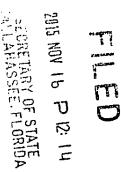
## L09000008450

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

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11/16/15--01018--002 \*\*25.00



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**3 MASON** 

## COVER LETTER.

Division of Corporations		
VSB Holding, LLC		
	of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
Milton Volz		
Name of Person		
VSB HOLDING, LLC		
Firm/Company		
5645 CORAL RIDGE DRIVE, STE 339		
Address		
CORAL SPRINGS, FL 33076		
City/State and Zip Code		
volzm@bellsouth.net		
E-mail address: (to be used for future annual	report notification)	
For further information concerning this matter, ple	ease call:	
Milton Volz	954 850-4400	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following am	aount:	
<b>□</b> \$25 Filing Fee	□ \$55 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.

1. Na	me of the limited liability company: VSB HOLDIN	G, LLC					
2. (a)	VSB HOLDING, LLC	(b) VSB HOLDING, LLC					
<b>-</b> . (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (%)		Mailing addres			
	5645 CORAL RIDGE DRIVE, STE 339		5645 CC	DRAL RID	GE DF	RIVE,	STE 339
	CORAL SPRINGS, FL 33076	<del>-</del>	CORAL	SPRINGS	S, FL 3	3076	
	01/26/2009		L090000	08450			
3.	Date of filing/registration in Florida	4.		Document	number		
5. (a)	MILTON VOLZ						
J. (u)	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of State	- e:			
	MILTON VOLZ						
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS,	1	=			
	461 EAST HILLSBORO BLVD, STE 100-1						• •
	DEERFIELD BEACH , FL	33441			250	2015	@w4(29**T)
(b)	MILTON VOLZ				SETAR AHASS	9 I AON 5102	15
	Enter name of NEW Registered Agent and/or NEW Registered	Office add	lress:	-	35.0 - 3.3.0		in
	MILTON VOLZ			_	OF STATE	₽ G	O
	NEW Registered Office Address:				D.E.	드	
	5645 CORAL RIDGE DRIVE, STE 339			_			
	CORAL SPRINGS, FL_	33076		_			
the cha agent w was/we the arti Signat I heret provisi the obli to mere	imited liability company is not organized under the lawinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cless of organization or the operating agreement of the law of a member or authorized representative of a member by accept the appointment as registered agent and agreement of all statutes relative to the proper and complete in its proper and complete its prop	the regis ability co f the lim limited li  MIL	tered office mpany, it is ited liability iability con TON VOI	e and the bus hereby cony company hpany.  LZ  Printed or ty	nfirmed or as oth	that the herwise	of the registered the change(s) the provided in the change of the change
Signatu	Registered Agent						

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