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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Summit Group International Management, L Name 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 matter to the following:					
JULIE SCHULZ Name of Person					
SUMMIT GROUP MANAGEMENT, LLC Firm/Company					
3427 BANNERMAN ROAD, SUITE D208					
Address					
TALLAHASSEE FL 32312 City/State and Zip Code					
julie.schulz@summitgroup.biz E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
JULIE SCHULZ at (950) 219-8207 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 amount:					
\$25 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	ime of the limited liability company: SUMMIL GYOU	p International A	Management, L	
2. (a)	3427 <u>BANNERMAN ROAD</u> Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	Mailing address of lin	3425 BANNERMAN ROAD Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)	
	SUITE D208	SUITE 1.05-428		
	TALLAHASSEE FL 32312	TALLAHASSEE FL 3	32312	
		L100001318	393	
3.	Date of filing'registration in Florida 4.			
5. <u>(</u> a)	Registered Agent and Registered Office shown on the records of the Flor			
	2073 SUMMIT LAKE DRIVE Registered Office Address (MUST BE FLORIDA STREET ADDRE	<u> </u>	ارم درم منا	
	SUITE 155	. <u>.</u>	50.7	
	TALLAHASSEE	317	WE TARY	
(b) Finter name of NEW Registered Agent and or NEW Registered Office address:				
	3427 BANNERMAN ROAD, SUITE D208 NEW Registered Office Address	••	50 815 815	
	TALLAHASSEE ,FL 32	312		
the cha agent was/w	limited liability company is not organized under the laws of tange or changes are made, the Florida street address of the rewill be identical. Or, in the case of a Florida limited liability ere authorized by an affirmative vote of the members of the licles of organization or the operating agreement of the limite	gistered office and the business company, it is hereby confirmation in the second of t	s office of the registered ed that the change(s)	
	Check Rush	CLAUDE R. WALKER	3	
	ature of a member or authorized representative of a member		me of signee	
I nere provis the ob to mer notifie	by accept the appointment as registered agent and agree to a constant of all statutes relative to the proper and complete perfolligations of my position as registered agent as provided for it ely reflect, a change in the registered office address. I hereby the writing of this change.	act in this capacity. I further a rmance of my duties, and I am , n Chapter 605, F.S. Or, if this v confirm that the limited liabil	gree to comply with the familiar with and accept document is being filed ity company has been	
Signati	Manufacture of Registered Agent			