

Aug. 5. 2014 2:42PM Barnett, Bolt

No. 5230 P. 1  
Page 1 of 1

Division of Corporations

**L11000048162**

Florida Department of State  
Division of Corporations  
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Account Name : BARNETT, BOLT, KIRKWOOD, LONG & MCBRIDE  
Account Number : 072731001155  
Phone : (813) 253-2020  
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**LLC REGISTERED AGENT CHANGE  
AB CAPITAL GROUP, LLC**

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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 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. Name of the limited liability company: AB Capital Group, LLC
2. (a) 5310 Cypress Center Drive  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
Suite 110  
Tampa, FL 33609
- (b) 180 Beach Drive NE  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
Unit 702  
St. Petersburg, FL 33701
3. 04/22/2011 Date of filing/registration in Florida
4. L11000048162 Document number
5. (a) Bryan Greenberg  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
11 Baymont Street, #902  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
Clearwater Beach, FL 33767
- (b) 180 Beach Drive NE  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
NEW Registered Office Address:  
Unit 702  
St. Petersburg, FL 33701

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed 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

Michael D. Miller

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

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