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COVER LETTER

٧.

TO: Registration Section Division of Corporations					
FRML, LLC SUBJECT:					
	Vame of Limite	ed Liability Comp	any		
Dear Sir or Madam:					
The enclosed Registered Agent/Registered	Office Change	and fee(s) are sub	omitted for filing	,	
-	•	, ,	······	,•	
Please return all correspondence concerning	z this matter to	the following:			
NICOLAS SIHA					
Name of Person					
LEGALINC CORPORATE SERVICE	S INC.	,			
Firm/Company					
17350 STATE HIGHWAY 249					
Address					
HOUSTON, TX 77064				 t	
City/State and Zip Cod	le	<u> </u>			2016 FI
SUPPORT@LEGALINC.COM				気が	68
E-mail address: (to be used for future	annual report	notification)		(AC)	22
For further information concerning this mat	ter, please call	:			Þ ,
NICOLAS SIHA	713	478.104	40	معر ولد و معرفين وسيد المسروران المسروران	Ę
Name of Person	at (Area Code	& Daytime Tele	phone Ni	umber
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADI Registration Sec Division of Corp P.O. Box 6327 Tallahassee, Flo	tion porations		
Enclosed is a check for the follow	ing amount:				
■ \$25 Filing Fee	C	\$55 Filing Fee	& Certified Copy	y	

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.

l. Na	me of the limited liability company:				
2. (a)	382 NE 191ST ST	382 NE	191ST ST		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) #88538		Mailing address of (Note: MAY B.	•	
	MIAMI, FL 33179	MIAMI,	FL 33179	· 	
	07/18/2011	L110000	82059		
3. 5. (a)	Date of filing/registration in Florida USA-RA LLC	4.	Document nur	mber	
J. (a)	Registered Agent and Registered Office shown on the records of the 841 PRUDENTIAL DR.	he Florida Dept. of Stat	te:		
	Registered Office Address 12TH FLOOR	DDRESS)	_		
	JACKSONVILLE , FL	32207	-		
(b)	LEGALINC CORPORATE SERVICES INC.		_	i	
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> (Office address:		2016 ALL	
	5237 SUMMERLIN COMMONS		_	表別	The confidence of
	NEW Registered Office Address:			MIN N	
	SUITE 400		_	<u> </u>	
	FORT MYERS, FL	33907	:)
the cha agent w was/we the arti	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law under the organization or the operating agreement of the law under the organization or the operating agreement of the law under the organization or the operating agreement of the law under the	the registered offic bility company, it f the limited liabilit limited liability con NICOLAS S	e and the busing the hereby confirmed or a second s	ness office of rmed that the as otherwise name of signee	the registered change(s) provided in
provisi the obl to mere notified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address, I have a change of this change of the change of Registered Agent	ee to act in this cap performance of my I for in Chapter 60 ereby confirm that	oacity. I further duties, and I at 5, F.S. Or, if th the limited liab	r agree to coi m familiar wi his document bility compan	mply with the ith and accept is being filed ty has been