L11000086738

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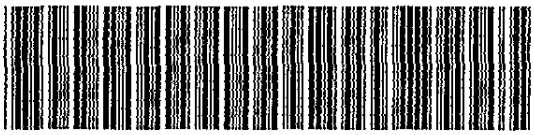

800261622088

LSP

Ashley Milstrey
9765 Southbrook Drive #3708
Jacksonville, FL 32256
December 27, 2014

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

RECEIVED
14 DEC 29 AM 10:00
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

Dear Department of State:

I am the managing member of AN Translations, LLC, Florida Document Number L11000086738. This letter is to inform you that I have changed my surname due to marriage. Please update your records to replace my previous name, Ashley Armstrong, with the following **new** name: Ashley Milstrey.

Thank you for your prompt attention to this matter.

Sincerely,

Ashley Milstrey

Ashley Milstrey

TYPE IN UPPER CASE
USE BLACK INK
This license not valid unless seal of Clerk, Circuit or County Court, appears thereon.

2014ML1342437
(APPLICATION NUMBER)

APPLICATION TO MARRY

1. GROOM'S NAME (First, Middle, Last) NICHOLAS AARON MILSTREY			2. DATE OF BIRTH (Month, Day, Year) 12/15/1987
3a. RESIDENCE - CITY, TOWN, OR LOCATION JACKSONVILLE	3b. COUNTY DUVAL	3c. STATE FLORIDA	4. BIRTHPLACE (State or Foreign Country) DISTRICT OF COLUMBIA
5a. BRIDES NAME (First, Middle, Last) ASHLEY NICOLE ARMSTRONG		5b. MAIDEN SURNAME (If different)	6. DATE OF BIRTH (Month, Day, Year) 06/14/1988
7a. RESIDENCE - CITY, TOWN, OR LOCATION JACKSONVILLE	7b. COUNTY DUVAL	7c. STATE FLORIDA	8. Birthplace (State or Foreign Country) FLORIDA

WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.

9. SIGNATURE OF GROOM (Sign full name Using Black Ink) Nicholas Aaron Milstrey	10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) 11/10/2014
11. TITLE OF OFFICIAL DEPUTY CLERK	12. SIGNATURE OF OFFICIAL (Use Black Ink) D.C
13. SIGNATURE OF BRIDE (Sign full name Using Black Ink) Ashley Nicole Armstrong	14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) 11/10/2014
15. TITLE OF OFFICIAL DEPUTY CLERK	16. SIGNATURE OF OFFICIAL (Use Black Ink) D.C

LICENSE TO MARRY

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

17. COUNTY ISSUING LICENSE ST. JOHNS	18. DATE LICENSE ISSUED 11/10/2014	18a. DATE LICENSE EFFECTIVE 11/13/2014	19. EXPIRATION DATE 01/09/2015

20a. SIGNATURE OF COURT CLERK OR JUDGE Diana Dutton	20b. TITLE CLERK OF THE COURT	20c. BY D.C. DH

CERTIFICATE OF MARRIAGE

I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.

21. DATE OF MARRIAGE (Month, Day, Year) 12-13-14	22. CITY, TOWN, OR LOCATION OF MARRIAGE St. Augustine, Florida
23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use Black Ink) Susan A. Milstrey	23c. ADDRESS (Of person performing ceremony) 2744 Ridgewood Ave Holly Hill FL 32117
23b. NAME AND TITLE OF PERSON PERFORMING CEREMONY (For notary stamp) SUSAN A. MILSTREY MY COMMISSION # FF121436 EXPIRES: January 05, 2016	24. SIGNATURE OF WITNESS TO CEREMONY (Use Black Ink) Kimberly Ann Strickler
	25. SIGNATURE OF WITNESS TO CEREMONY (Use Black Ink) Kimberly Ann Strickler

SEAL

I HEREBY CERTIFY THAT THIS DOCUMENT IS A TRUE AND CORRECT COPY AS APPEARS ON RECORD IN ST. JOHNS COUNTY, FLORIDA
WITNESS MY HAND AND OFFICIAL SEAL
THIS 19 DAY OF Dec 2014
CHERYL STRICKLAND, CLERK
BY: [signature] D.C.