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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTAX USA INC.

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Phone : (727)546-3335

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## LLC REGISTERED AGENT CHANGE T&J GLOBAL SERVICES "LLC"

Certificate of Status	U
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## H22000231948 3

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 805.0116, 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. N	lame of the limited liability company: TEU GLOBAL SE	ERVI	CES "LLC"	,
2. (a)	5850 HOUCHIN ST	(b) 5850 HOUCHIN ST		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) UNIT F		UNIT F	Mailing address of limited liability company: (Note: MAY BE POST OFFICE TOX)
	NAPLES FL 34109	_	NAPLES	FL 34109
	02/09/2012		L12000019812	
3. 5. (a)	Date of filing/registration in Florida  JAROSLAW RYKOWSKI	4.		Document number
	Registered Agent and Registered Office shown on the records of a 12811 CARRINGTON CIR	he Flo	ride Dept. of Stat	re:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) UNIT 102			TALCANASS
	NAPLES	34105	;	
(ъ)	JAROSLAW RYKOWSKI  Enter name of NEW Registered Agent and/or NEW Registered	Office.	-44	ASSET A
	380 31ST STREET NW	FLORING TO		
•	NEW Registered Office Address:			<u>.                                    </u>
	NAPLES, FL	4120		•
agent w was/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the E	egisti ility the li mitoc	tred office and company, it is mited liability	i the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
< Signat	are of a member of authorized representative of a member	_		Printed or typed name of signoc
I hereb provision the obli to mere notified	ry accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete per gations of my position as registered agent as provided by reflect a change in the registered office adaress, I he in writing of this change.	to a erform for in reby	ct in this capa nance of my d Chapter 605, confirm that t	
Signatur	e of Registered Agent	-		