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Division of Corporations

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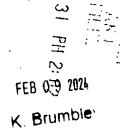
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## LLC REGISTERED AGENT CHANGE JD SOLVE IT, LLC

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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. N	ame of the limited liability company:	JD S	olve IT, LLC
2. (a)	7004 Tavistock Lakes Blvd, 910	(b) _	7004 Tavistock Lakes Blvd, 910
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Lake Nona, FL 32827		Lake Nona, FL 32827
	08/22/2012		L12000107975
3.	Date of filing/registration in Florida	4,	Document number
5. (a)	JD Solve IT, LLC   Registered Agent and Registered Office shown on the records of t	he Florida De <sub>l</sub>	pt. of State:
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)	
	7004 Tavistock Lakes Blvd, 910	)	<u></u>
	Lake Nona , FL	3282	7 202
(b)	Corporate Creations Network Inc	i.	<u> </u>
, ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>		2024 JAN 3 1
	801 US Highway 1		
	NEW Registered Office Address:		- 2: 02
	North Palm Beach FL	3340	08
chang- agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	registered o bility compa f the limited	office and the business office of the registered any, it is hereby confirmed that the change(s). I liability company or as otherwise provided in
	Rachel Joseph sture of a member		Rachel Joseph, Attorney-in-Fact
	<i>U</i>	<del></del>	Printed or typed name of signee
provis the ob to mer	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change.	ve to act in t performance for in Chaj eveby confi	his capacity. I further agree to comply with the effort of my duties, and I am familiar with and accept over 605, F.S. Or, if this document is being filed rm that the limited liability company has been

Rachel Joseph Rachel Joseph, Special Secretary
Signature of Rypistere Agent