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<i>err</i> <del>-</del>	To: Division of Corporations Fax Number : (850)617-6383						
	From:	From:  Account Name : REGISTERED AGENTS INC.  Account Number : I20090000081  Phone : (307)200-2803  Fax Number : (855)330-1010					
•	annua	email address for this busine report mailings. Enter only  Address:	one email address pl	for future ease.** 			
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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.

Name	of the limited liability company: TORNIK	LLC			
	6 Old Forge Rd		(b) 16 Old Forge Rd		
(a) <u></u>	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
Suite B			Suite B		
F	Rocky Hill, CT 06067		Rocky H	ill, CT 06067	
O:	8/22/2012 ·		L120001	08118	
	Date of filing/registration in Florida	<del></del> 4.		Document number	
(a) A	ANGELO & BANTA, P.A.				
(b) F	egistered Agent and Registered Office shown on the records of 15 East Las Olas Boulevard Registered Office Address (MUST RE FLORIDA STREE) Suite 850 Fort Lauderdale	3330	)1	18 AUG 16 AM 3: 25 SECRITIVE OF STATE SECRITIVE OF FLORIDA	
	Tampa	 FL 3360	)7	-	
the list e chan gent wi	mited liability company is not organized under the ige or changes are made, the Florida street address ill be identical. Or, in the case of a Florida limited to authorized by an affirmative vote of the member less of organization or the operating agreement of the organization of the operating agreement of the organization of a member or authorized representative of a member.	laws of t of the re liability s of the l he limite	ne State of Fl gistered offic company, it imited liabili	is hereby confirmed that the change(s ty company or as otherwise provided	

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 Agent