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COVER LETTER

TO: Registration Section Division of Corporations Schneider Rothman Intellectual Property Law Group PLLC Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Joel B. Rothman Name of Person Joel Benjamin Rothman P.A. Firm/Company 4651 North Federal Highway Address Boca Raton, FL 33431 City/State and Zip Code ioel.rothman@sriplaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Joel B. Rothman Name of Person STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301

■ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

Enclosed is a check for the following amount:

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

Pursuant to the provisions of sections 608.416 or 608.508, 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.

lity company: Schneider Rothma	an Intellectual Property Law Group PLLC		
ess of limited liability comp STREET ADDRESS)	Dany: 4651 North Federal Highway Boca Raton, FL 33431		
mited liability company: OST OFFICE BOX)	4651 North Federal Highway Boca Raton, FL 33431		
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ldress:			
	Boca Raton, FL 33486		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		4651 North Federal Highway	
	Boca Raton	,FL_33431	
nge or changes are made, the registered agent will be in confirmed that the change liability company or as other	the Florida street address of the dentical. Or, in the case of a se(s) was/were authorized by the provided in the articles.	the registered office	
	ess of limited liability company: OST OFFICE BOX) mited liability company: OST OFFICE BOX in Florida d Registered Office shown ddress: Registered Agent and/or light gent: fice Address: OA STREET ADDRESS) any is not organized under the registered agent will be in the change in the change in the change in the change in the limited liability company.	mited liability company: DST OFFICE BOX) Boca Raton, FL 33431 L13000000736 4. Document number d Registered Office shown on the records of the Florid Joel Benjamin Rothman, P.A. ddress: 5295 town Center Rd Suite 202 Boca Raton, FL 33486 Registered Agent and/or NEW Registered Office acceptation gent: fice Address: DA STREET ADDRESS) Boca Raton any is not organized under the laws of the State of Floringe or changes are made, the Florida street address of the registered agent will be identical. Or, in the case of a by confirmed that the change(s) was/were authorized by iability company or as otherwise provided in the article he limited liability company.	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00