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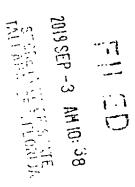
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TO: Registration Section

INHS18 (2/14)

Division of Corporations						
ROBERT E. PERSHES, ES	ROBERT E. PERSHES, ESQ. PLLC					
	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Of	fice Change and fe	e(s) are submitted for filing.				
Please return all correspondence concerning the	his matter to the fol	lowing:				
Robert E. Pershes						
Name of Person		•				
Robert E. Pershes, Esq. PLLC						
Firm/Company		•				
5301 N. Federal Highway Suite 110						
Address		•				
Boca Raton, Florida 33487						
City/State and Zip Code		•				
rpershes@perkinspershes.com						
E-mail address: (to be used for future an	nual report notifica	ition)				
For further information concerning this matter	r. please call:					
Robert Pershes	561	910-8923				
Name of Person		Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regis Divis P.O.	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, Florida 32314				
Enclosed is a check for the followin	g amount:					
☑ \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy				

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. Na	ame of the limited liability company: Robert E. Pe	rshes, I	Esq. PLL(<u> </u>
2. (a)	5301 N. Federal Highway Suite 110	(I	5301 N	. Federal Highway Suite 110
2. (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)
3.	09/15/2014 Date of filing/registration in Florida	- 4.	L140001	43479 Document number
5. (a)	Robert E. Pershes			
	Registered Agent and Registered Office shown on the records of 3839 NW Boca Raton Boulevard Registered Office Address (MUST BE FLORIDA STREET.		· · · · · · · · · · · · · · · · · · ·	
	Suite 200			201
	Boca Raton, FL	33431		7019 SEP 1771 AF
(b)	Enter name of NEW Registered Agent and/or NEW Registered 5301 N. Federal Highway NEW Registered Office Address: Suite 110	Office ad	ldress:	3 M 10: 38
	Boca Raton , FL	33487		_
Signal I here provis the obto mer notifie	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the authorized the appointment as registered agent and agricultures of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address. It is discussed in writing of this change.	the reginability confirmated Ro	stered offic ompany, it nited liabili liability con bert E. Pe	te and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany. Printed or typed name of signee Printed or typed name of signee

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