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## STAMMENT 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.

. Na	me of the limited liability company: Military Jacob	o, LLC		
. (a) .	1509 N Military Trail, Suite 200		(b) Same	
· ( <del>-</del> ) .	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(-) <u></u>	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	West Palm Beach, FL 33409	<u> </u>	<del></del>	
	12/05/2017		 L14000	186920
	Date of filing/registration in Florida	<b>-</b> 4.		Document number
(a)	Corporate Creations Network, Inc.			
(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
	11380 Prosperity Farms Road #221E			
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRE	SS)	<del>-</del>
				<b>*** ** **</b>
	Palm Beach Gardens , FI	3340	9	
(b)	Karen Dietrick			22 22
	Enter name of NEW Registered Agent and/or NEW Registered	Office	address:	
	1509 N Military Trail, Suite 200			전 38 전 38
	NEW Registered Office Address:			
	West Palm Beach	3340	)9	
e char gent w as/we	imited liability company is not organized under the large or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited line authorized by an affirmative vote of the members of the organization or the operating agreement of the	ws of the reliability of the left limite	gistered off company, i imited liabi	ice and the business office of the register t is hereby confirmed that the change(s) lity company or as otherwise provided in
Signat	ure of a member or authorized representative of a member	_	<del></del>	Printed or typed name of signee
rovisie e obli mere	by accept the appointment as registered agent and age ons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I I in writing of this change.	e perfor	mance of m	iv duties, and I am familiar with and acce

Signature of Registered Agent