## L150000 42773

R. WHITE

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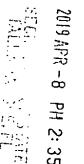
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## COVER LETTER

TO: Registration Section Division of Corporations	•
SUBJECT: ACCELERATED PERFORMANCE GREUP, LE	ــــــــــــــــــــــــــــــــــــــ
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:	
STEVES MONZING Name of Person	
PICELOLATED POLFBARNICE GROP, LLC Firm/Company	
14540 FALING MEE CT. Address	
ORLANDO, FL 32837 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Steven Mionzillo at (49) 644 - 8361  Name of Person Area Code & Davtime Telepho	
Name of Person Area Code & Daytime Telepho	ne Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:	

INHS18 (2/14)

## 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. Nar	ne of the limited liability company: Accaera TED He	drawnie Grap, LL
2. (a) _	Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	14540 FALING TREE CT. DELANDO, FL 32837	14540 FALLING TREE (+ DRLANDO, 12 32837
	3/9/15	L15600 42773
3.	Date of filing/registration in Florida 4.	Document number
5 (a)	UNITED STATES CORPORATION AGENTS, INC	
_	Registered Agent and Registered Office shown on the records of the Florida Dept. of Sta	nte:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	_
	13302 WINDNG DAK CORT A	
	TAMPA .FL 3361Z	2019 APR
(b) _	STEVEN MONZING	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:	2. P
	14540 Anny TREE Cr.  NEW Registered Office Address:	2: 35
	ORLANDO JFL 32837	_
the chan agent wi was/wer	mited liability company is not organized under the laws of the State of Fige or changes are made, the Florida street address of the registered official be identical. Or, in the case of a Florida limited liability company, it re authorized by an affirmative vote of the members of the limited liabilities of organization or the operating agreement of the limited liability co	ce and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
<	to Mini sra	Printed or typed name of signee
Signatu	ird of a member or authorized representative of a member  v accept the appointment as registered agent and agree to act in this cap	

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 by writing of this change.

Signature of Registered Agent