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S. WARREN DEC 0 8 2017

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: GRAPHENE FLECTRONIC & TECNOLOGY LLC 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:						
Ressin Aslantas Name of Person						
Ciraphere Electronic & Technology 11c						
17027 W. Dixie Huy Ste 126 Address						
N. Miani Beach FL 33160 City/State and Zip Code						
info@proshere-electronic.com E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Rugen Aslantos at (954) 934 8237 Area Code & Daytime Telephone 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:						
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					
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. Na	Name of the limited liability company: <u>LTCaphese</u>	Electr	B aíc	VTELLAOLOPY LLC
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing add	dress of limited liability company:
	17027 W. Dixie Hyw Ste 126 W. Miani Beach Fl 33160			
3.	5 6	<u> </u>		55980 nt number
5. (a)	Registered Agent and Registered Office shown on the records of the I	Florida Dept. of Sta	ate:	
	Registered Office Address (MUST BE FLORIDA STREET ADL	ORESS)	-	
	927 E. Wew Har Ave, SI	4 203		17 0
	Melbourne FL	32901	<u>′</u>	EC-6
(b)	Rangin Aslanties			92.1
(0)	Enter name of NEW Registered Agent and/or NEW Registered Off	ice address:		PH 12: 42 STATE EF FLORID
	17027 W. Dixie Huy NEW Registered Office Address:	Stc. 12	-6	PRIDA 45
	W. M. on, Beach		_	
	, FL	33/60	_	
the cha agent v was/w	timited liability company is not organized under the laws change or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabil were authorized by an affirmative vote of the members of the ticles of organization or the operating agreement of the limited liability.	registered officity company, it is limited liabil	ce and the is hereby of the compare	business office of the registered confirmed that the change(s)
_R	As last for an authorized representative of a member	Respic	7_B	r typed name of signee
provisi the obi to mer notifie	why accept the appointment as registered agent and agree isions of all statutes relative to the proper and complete perbligations of my position as registered agent as provided forely reflect a change in the registered office address. I here is in writing of this change.	to act in this ca formance of my or in Chapter 60 eby confirm tha	pacity. 1 for y duties, ar 95, F.S. Of t the limite	urther agree to comply with the ad I am familiar with and accept r, if this document is being filed ed liability company has been
Signatu	Iture of Registered Agent			