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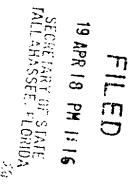
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COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJE	Ecuity Edge LLC							
		of Limited L	iability Company					
Dear S	ir or Madam:							
The en	closed Registered Agent/Registered Office	Change and	fee(s) are submitted for filing.					
Please	return all correspondence concerning this r	natter to the	following:					
Suzai	nne D. Meehle, Esq.							
	Name of Person							
Meeh	ile & Jay P.A.							
	Firm/Company							
1215	E Concord Street							
	Address							
Orlan	do, FL 32803							
	City/State and Zip Code		_					
tsteph	nan@ecuityedge.com							
Е	-mail address: (to be used for future annua	l report noti	fication)					
For fur	ther information concerning this matter, pl	ease call:						
Suzar	nne D. Meehle, Esq.	407	792-0790					
	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	Re Di P.	AILING ADDRESS: egistration Section vision of Corporations O. Box 6327 ellahassee, Florida 32314					
Enclosed is a check for the following amount:								
	△ \$25 Filing Fee	□ s	55 Filing Fee & Certified Copy					
INHSIS	8 (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.	Name of the limited liability compa	my: Ecuity Edge	LLC ————						
2. (a	a)								
	Principal office address of limit (Note: MUST BE STRE	ted liability company:		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	1800 Pembroke Pines, St	uite 300		1800 Pembroke Pines, Suite 300					
	Orlando, FL 32810			Orlando	, FL 32810				
	July 8, 2015		L	1500011	17635				
3.	Date of filing/registration	on in Florida	4.		Document number	-			
5. (Robert Stephan								
• • •	Registered Agent and Registered Office	e shown on the records of	of the Florida E	Pept. of State	. ::				
	5932 Paxton Court	5932 Paxton Court				4			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			•	SECR ALL A	19 AI			
	Apopka	,[32703		-	ETARY CIARY	APR 18		
(t	Suzanne D. Meehle, Esq.						PH 1: 16	m	
	Enter name of NEW Registered Agent	Enter name of NEW Registered Agent and/or NEW Registered Office address:			-	SIATE		\cup	
	1215 E Concord Street	1215 E Concord Street			3	IDA S	<u>e</u>		
	NEW Registered Office Address:				-				
	Orlando		22902						
		, ſ	_L 32803		-				
the c agen was/	e limited liability company is not or change or changes are made, the Flo it will be identical. Or, in the case of were authorized by an affirmative varieties of organization or the opera	orida street address of a Florida limited vote of the members	of the registe liability con s of the limit ne limited lia	ered office ipany, it is ed liability	e and the business of s hereby confirmed y company or as of ipany.	office of the	he reg change	istered (s)	
Sig	gnature of a member or authorized represent	tative of a member	1010	ou otopi	Printed or typed name	of signee			
I her prov the o to me notif	ereby accept the appointment as regrisions of all statutes relative to the obligations of my position as registed reflect a thange in the registed field in writing of this change.	istered agent and a	gree to act i te performa ded for in Cl I hereby con	n this cape ice of my e papter 605 ifirm that	acity - I further avr	er to con	nply wi th and is bein v has b	ith the accept g filed een	