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FLORIDA DEPARTMENT OF STATE REGISTRATION SECTION DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FLORIDA 32314

SARLI GROUP LLC 10855 NW 88TH TERRACE UNIT 103 DORAL, FLORIDA 33178

To whom it may concern:

Please be advised that we have a new email and new address:

New Email: sarli16@gmail.com

Business principal Address:

Old address: 6187 NW 167TH STREET SUITE H-24

MIAMI, FL 33015

New Address: 10855 NW 88TH TERRACE UNIT 103

DORAL, FL 33178

CARMELO SARLI

Manager

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.

Nai	me of the limited liability company: SARLI GRC	UP LLC		
	10855 NW 88TH TERRACE SUITE 103	(1	SAME	
(Δ) -	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		-/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	DORAL, FLORIDA 33178			
	08/05/2015		L150001	34704
	Date of filing/registration in Florida	4.		Document number
(a)	ANDRES F LASTRE			
	Registered Agent and Registered Office shown on the records of	of the Florid	a Dept. of Sta	ate:
	6787 NW 167 STREET H24			_
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRES.	<u>27</u>	THE STATE
	HIALEAH	33015		TALLAHASS
(b) .	CARMELO SARLI			ARY OF STATE
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office 20	ldress:	To G
	10855 NW 88TH TERRACE SUITE 103		_	ORID
	NEW Registered Office Address:			**
				_
	DORAL1	L_33178		_
chai int w s/we	mited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the members cless of organization or the operating agreement of the	of the regi liability c s of the lir	stered offic ompany, it nited liabil	ce and the business office of the registere is hereby confirmed that the change(s) ity company or as otherwise provided in
			\wedge	rimolo SARLI

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 in writing of this change.

Signature of Registered Agent