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| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| • |
| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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. COVER LETTER

| TO: | Registration Section Division of Corporations | | |
|--------------------------------|--|-------------------------|--------------------------------------|
| SUBJ | ECT: EVEREST | MANAGEMENT, LLC | ; |
| | 1 | Name of Limited Liab | pility Company |
| Dear S | Sir or Madam: | | |
| The en | iclosed Registered Agent/Registered | Office Change and fe | e(s) are submitted for filing. |
| Please | return all correspondence concerning | g this matter to the fo | llowing: |
| Mr. S | ihyamie Dixit, Esq. | | |
| | Name of Person | | - |
| Dixit | Law Firm | | |
| • | Firm/Company | | |
| 3030 | N Rocky Pt Dr W #260 | | |
| | Address | | • |
| Tamp | pa, FL 33607 | | |
| | City/State and Zip Cod | le | • |
| sdixit | @dixitlaw.com | | |
| E | -mail address: (to be used for future | annual report notifica | ition) |
| For fu | ther information concerning this mat | tter, please call: | |
| Shya | mie Dixit | 813 | 252-3999 |
| | Name of Person | | Area Code & Daytime Telephone Number |
| | STREET/COURIER ADDRESS: | MAI | LING ADDRESS: |
| Division of Corporations Divis | | | stration Section |
| | | | ion of Corporations |
| | Clifton Building | | Box 6327 |
| | 2661 Executive Center Circle Tallahassee, Florida 32301 | Talla | hassee, Florida 32314 |
| | Enclosed is a check for the follow | ing amount: | |
| | S25 Filling 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.

| Na | me of the limited liability company:EV | EREST N | IANAGEN | MENT, LLC | | |
|--------------------------|--|---|--|---|---|--|
| (a) | 5005 SAN MARINO CIRCLE | (t | 5005 | SAN MARINO C | IRCLE | |
| . (-) | Principal office address of limited liability company: (Note: MUST BE STREET APDRESS) | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) LAKE MARY, FL 32746 | | | |
| | LAKE MARY, FL 32746 | | | | | |
| | | _ | | · - · | | |
| | 12/14/2015 Date of filing/registration in Florida | - 4. | | L15000207761 Document numb | | |
| | WILLIS, DAVID C | ٠٠. | | Document numb | CI | |
| (a) | Registered Agent and Registered Office shown on the records of | Cthe Florida | - Dent of St | | | |
| · | LINCOLN PLAZE 300 SOUTH ORANGE A | uite. | | | | |
| | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | | | | | |
| | SUITE 1400 PO.BOX 1873 | | | | 2 55 1 | |
| | ORLANDO | 32801 | | | - : z | |
| | , r | L | · | _ | NOV F | |
| | DIXIT LAW FIRM, C/O SHYAMIE DIXIT | | | | V-9 | |
| | Enter name of NEW Registered Agent and/or NEW Registered Office address: | | | | ## ₽ □ | |
| | | | | | | |
| | 3030 N ROCKY PT DR W SUITE 260 | | | | 2: 59 TE .0RIDA | |
| | NEW Registered Office Address: | | ω | | | |
| | TAMPA | 33607 | | | | |
| | . F | L_00007 | | _ | | |
| e char ent w is/we | mited liability company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members eles of organization or the operating agreement of the | of the reginability control of the limited l | stered offi mpany, it ited liabil iability co | ce and the business is hereby confirme ity company or as o | office of the registered that the change(s) | |
| Signati | are of a member or authorized representative of a member | | | Printed or typed nan | ne of signee | |
| ovisio 2 obli mere | y accept the appointment as registered agent and as ons of all statutes relative to the proper and complet gations of my position as registered agent as provid by reflect a change in the registered office address, i ar writing of this change. | gree to act e perform led for in C I hereby co | in this ca ance of m Thapter 60 onfirm tha | pacity. I further ag y duties, and I am f 95, F.S. Or, if this a t the limited liabili | gree to comply with the amiliar with and acce document is being file by company has been | |