Sep. 30. 2016 12:05PM Division of Corporations

Gray Robinson

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Florida Department of State

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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 opens, or both, in the State of Florida.

I. Ne	ume of the limited liability company; CRYPTICAL	. COVI	E IJ, L	rc		
2. (s)			(ბ)	Mailing ad	stress of limited liability	
	Randolph, NJ 07869		Ra	andolph, NJ (7869	
	March 8, 2016		L16	1000046874		
3.	Date of filing/registration in Plorida	4,		Docume	ent number	
5. (a)	Ringistered Agent and Registered Office shown on the records of R & A AGENTS, INC. Registered Office Address MUST BE FLORIDA STREET 200 S ORANGE AVENUE, SUITE 1000			L of State:		
		3280	1			
(p)	Roter name of NEW Registered Agent and/or NEW Registered				CONTRACTOR TO THE TOTAL	CI CONTROL OF THE CON
	GARY M. BERKSON					j j
	NEW Registered Office Address: 301 E, PINE STREET, SUITE 1400			· .	A & FLORI	D
	ORLANDO PI	3280	1		28 DA	
the chargent v	imited liability company is not organized under the is age or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited limited authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the registry of the 11 climited	platore compa mited l liabil	i office and the ny, it is bereby liability compar	business office of a confirmed that the	the registere change(s)
I herei provisi he obl to mere nostfied	our of a member or enhanced representative of a member by accept the appointment as registered agent and agent ons of all statutes relative to the proper and complete ligations of my position as registered agent as provide the proper acceptance of the proper adentification of the change in the registered office address, it is writing of the change.	ree to a perfon a for in hereby	ct in the nance Chap confire		r typed name of signee wither agree to con and I am Jamiliar wi and I this document and liability company	aply with the th and accep is being filed y has been
Signatur	Pol Registrati Agent Division of Corporations P.O. FILING P			illahassoo, PL	32314	

INHS1# (2/14)