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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (855)330-1010

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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 agent, or both, in the State of Florida.

a)	ume of the limited liability company: 1116101	•	(b)				
α,	Principal office address of limited liability companion (Note: MUST BE STREET ADDRESS)	y:		Mailing address of l (<u>Note: MAY BE</u>			•
	11/09/17		 L17	000232547			
	Date of filing/registration in Florida	4.		Document num	iber		
a)	Milton, Christopher R.						
• • •							
,	Registered Agent and Registered Office shown on the reco	rds of the Flor	ida Dept. o	f State:			
,	Registered Agent and Registered Office shown on the reco 411 Walnut St. #16355	rds of the Flor	ida Dept. o	f State:			
. ** /			<u>.</u>	f State			
. ** /	411 Walnut St. #16355	CEET ADDRE	<u>SS)</u>	f State		-	
,	411 Walnut St. #16355		<u>SS)</u>	f State		- 4 <u>1</u>	•
	411 Walnut St. #16355 Registered Office Address (MUST BE FLORIDA STR Green Cove Springs Registered Agents Inc	EET ADDRE	<u>889</u> 43	f State			
	411 Walnut St. #16355 Registered Office Address (MUST BE FLORIDA STR	EET ADDRE	<u>889</u> 43	r State			
b)	411 Walnut St. #16355 Registered Office Address (MUST BE FLORIDA STR Green Cove Springs Registered Agents Inc	EET ADDRE	<u>889</u> 43	i State			
	411 Walnut St. #16355 Registered Office Address (MUST BE FLORIDA STR Green Cove Springs Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered Agent Age	EET ADDRE	<u>889</u> 43	r State			
	411 Walnut St. #16355 Registered Office Address (MUST BE FLORIDA STR Green Cove Springs Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered Agent Age	EET ADDRE	<u>889</u> 43	r State			

was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Robin Jones Signature of a member or authorized representative of a member

Printed or typed name of signee

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.

David Roberts - Assistant Secretary

Signature of Registered Agent