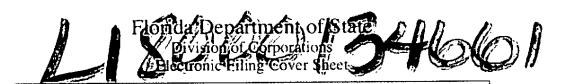
Division of Corporations



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From:

Account Name : CORPORATE CREATIONS INTERNATIONAL

Account Number : 110432003053 : (561)694-8107 Phone

: (561)694-1639 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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LLC REGISTERED AGENT CHANGE INVERUSA GROUP LLC

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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.

| I. Na | me of the limited liability company: INVERUSA C | GROUP | LLC | | | | |
|--|---|--|--|---|---|-----------------------------------|---|
| 2. (a) | 175 SW 7TH ST STE 2112 | (h | (b) 175 SW 7TH ST STE 2112 | | | | |
| £. (a) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | (0 | , | Mailing address of (Note: MAY BE | | | |
| | MIAMI, FL 33130 | | MIAM | II, FL 33130 | | | |
| | | | | | | | |
| | 05/31/2018 | | L18000 | 134661 | | | |
| 3. | Date of filing/registration in Florida | 4. | | Document nur | nber | | |
| 5. (a) | IKALON LLC | | | | | | |
| . (u) | Registered Agent and Registered Office shown on the records of | the Florida | Dept. of S | tate: | | | |
| | 175 SW 7TH ST STE 2112 | | | | | | |
| | Registered Office Address (MUST BE FLORIDA STREET | ADDRESS | Ž | | | 19 | |
| | | | | | ; ; | | |
| | MIAMI | 33130 | | | | Æ₹ | ۔۔۔ ۔ |
| (b) | Corporate Creations Network Inc. | | | | े हैं। 13 75 2 15 1 | 12 | |
| (0) | Enter name of NEW Registered Agent and/or NEW Registered | d Office ad | dress: | | . <u>. </u> | H | D |
| | 11380 Prosperity Farms Road #221E | | | <u></u> | | 85.5 | |
| | NEW Registered Office Address: | | | | | | |
| | Palm Beach Gardens , FI | 33410 | | | | | |
| the cha agent v was/wa the arti | imited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the | ws of the of the regi iability co of the lin e limited | State of stered off ompany, nited liab liability o | fice and the busin it is hereby confir ility company or a company. | ess off med th is other | at the | the registered change(s) |
| freez | | | | · · · · · · · · · · · · · · · · · · · | ry, Attorney-in-Fact Printed or typed name of signee | | |
| | ture of a member or authorized representative of a member | | د فیلم بیده م | | | | |
| provis the obt to mer | by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providedly reflect a change in the registered office address, I d in writing of this change. | ree to ac e perform ed for in hereby c | i in ints c lance of h Chapter (onfirm th | apacity. I jurther ny duties, and I at 805, F.S. Or, if th at the limited lial | agree m Jamii jis doci bility co | io co liar w ament ompai | mply with the rith and accept is being filed ny has been |

Signature of Registered Agent

Jenisa Irizarry, Attorney-in-Fact