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## COVER LETTER

10:	Division of Corporations		
SUBJI	ECT: Accredited Name of Lir	Gemological nited Liability Company	Services LLC
Dear S	Sir or Madam:		
The en	nclosed Registered Agent/Registered Office Char	nge and fee(s) are submitte	ed for filing.
Please	return all correspondence concerning this matter	to the following:	
	George Athanaso Name of Person	poules	
Acc	redited Genological S	Services LLC	
	14016 Notreville W. Address	ay	
	Tampa, FL 33624 City/State and Zip Code	<del>1</del>	
I	gemappraiser agang	mail.com	
	rther information concerning this matter, please o		
_6	eorge Athanasopoulos at (	813 ) 83 Area Code & Da	20 - 3026 aytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Registration S Division of Co The Centre of 2415 N. Monr Tallahassee, F	ection orporations Tallahassee oe Street, Suite 810
	Enclosed is a check for the following amoun	t:	
	S25 Filing Fee	\$55 Filing Fee & Ce	ertified Copy
INHS1	8 (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.

1. Na	me of the limited liability company: Accredited Gemological Services LLC
	3
∠. (it) _	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	14016 Notreville Way 14016 Notreville Way
	Tampa, FL 33624 Tampa, FL 33624
	Hugust 2014 L18000198699  Date of filting/registration in Florida 4. Document number
3.	
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	United States Corporation Agents, Inc. Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	<b>,</b>
	13302 Winding Oak Court, A
	Tampa ,FL 33612
	,
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	NEW Registered Office Address:
	14016 Notreville Way
	There to the way
	Tampa FL 33624
If the li	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the
change	or changes are made, the Florida street address of the registered office and the business office of the registered ill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
was/we	re authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
the artic	eles of organization of the operating agreement of the limited liability company.
Signan	are of a member of a member Drinted or typed name of signee Printed or typed name of signee
Lharab	to descent the appropriate and according to an analysis of this according to the second second second so with the
provision the oblication to mere notified	in a cept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the onsole of only duties, and I am familiar with and accept gations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a chapter if the registered office address, I hereby confirm that the limited liability company has been in writing of this change.
Signature	e of Registered Ment