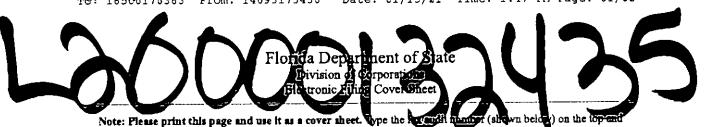
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From:

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Account Number : I20180000011 : (844)386-0178 Phone : (214)317-4754 Fax Number

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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,

TAMPA, FL 33600 3. Date of filing/regist 5. (a) Registered Agent and Registered C DAMIAN CLARK Registered Office Address (ME S50 N. Reo St., Ste. 300 TAMPA (b) Enter name of NEW Registered 2 LEGALINC CORPORATE S NEW Registered Office Address: 5237 SUMMERLIN COMMO	imited hability company: IREET ADDRESS A S()() ration in Florida Office shown on the records	(b)	Vailing address of line (Note: MAY BE E. Reo St., St., St., St., St., St., St., St.,	eost 6 e. 30	ability con DEFICE B ()()	(OX)
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5237 SUMMERLIN COMMO	ERVICES INC.				13. B	
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		, FL				
If the limited liability company is no change or changes are made, the Flagent will be identical. Or, in the cowas/were authorized by an affirmate the articles of organization or the observations of a member of authorized reprovisions of all statutes relative to the obligations of my position as reto merely reflect a change in the re-	ot organized under the orida street address of a Florida limite ive vote of the memb perating agreement of resentative of a member of the proper and congress of the proper and congres	c laws of the State of E the registered office a d hability company, it ers of the limited liabil the limited hability co KRISTINE W I agree to act in this co left performance of K	is hereby confir lity company or a company. AITE Printed or typed apacity. I further to duties, and I in	uned the same of agreen families do	hat the corwise post signed to comiliar with the control of the co	hange(s) rovided in ply with the h and accept s being filed
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