

09/08/2011

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(845) 818-3588

P.001/002

Division of Corporations

M08000000 3163

**Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : VCORP SERVICES, LLC
Account Number : I20080000067
Phone : (845) 425-0077
Fax Number : (845) 818-3588

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

Email Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**REGISTERED AGENT CHANGE
VCORP SERVICES, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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 608.416 or 608.508, 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. Name of the limited liability company: VCORP SERVICES, LLC

2. (a) Principal office address of limited liability company: 25 Robert Pitt Drive, Suite 204

(Note: MUST BE STREET ADDRESS)

Monsey, NY 10952

(b) Mailing address of limited liability company: 25 Robert Pitt Drive, Suite 204

(Note: MAY BE POST OFFICE BOX)

Monsey, NY 10952

07/03/2008

3. Date of filing/registration in Florida

M08000003163

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

LIEBERMAN, ARI

Registered Office Address:

7200 W CAMINO REAL

SUITE 102

BOCA RATON FL 33433

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

Keith Wasserstrom

NEW Registered Office Address:

5011 South State Road 7

(MUST BE FLORIDA STREET ADDRESS)

Suite 108

Davis, FL 33514

If the limited 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 agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) 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.

Signature of a member or authorized representative of a member

Isaac Muller

Printed or typed name of signer

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 608, 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.

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (05/08)

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