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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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LLC REGISTERED AGENT CHANGE

MERIT FINANCIAL 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.

1.	Na	me of the limited liability company: MERIT FINA	NCIAL	GROUP, LLC	
2	(a)	2400 Lakeview Parkway Suite 550	(b)	2400 Lakeview Parkway Suite 550	
۷.	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		Alpharetta, GA 30009	-	Alpharetta, GA 30009	
			-		
		10/28/2011		M11000005442	
3.		Date of filing/registration in Florida	4.	Document number	
5.	(a)	INCORP SERVICES, INC.			
-	(-,	Registered Agent and Registered Office shown on the records of the	ne Florida I	Dept. of State;	
		17888 67TH COURT NORTH			
		Registered Office Address MUST BE FLORIDA STREET A	DDRESS)		
		LOXAHATCHEE, FL_	3347	0 22	
	(b)	Corporate Creations Network Inc.		, * · · · · · · · · · · · · · · · · · ·	
	(0)	Enter name of NEW Registered Agent and/or NEW Registered C	Office add	NU	
		801 US Highway 1			
		NEW Registered Office Address:			
				5	
		North Palm Beach, FL_	33408	3	
cha age	inge ant v s/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egistered oility con the limit	I office and the business office of the registered npany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in	
/s/	Ca	itlin Lazarus	Caitl	in Lazarus, Attorney-in-Fact	
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.

/s/ Caitlin Lazarus

Caitlin Lazarus, Special Secretary

Signature of Registered Agent