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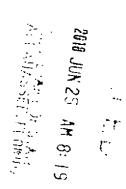
(Requestor's Name)					
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COVER LETTER

INHS18 (2/14)

TO: Registration Section Division of Corporat	ions					
SUBJECT: Impaktu, LLC	JBJECT: Impaktu, LLC Name of Limited Liability Company					
	Name	of Limited Li	laomly Company			
Dear Sir or Madam:						
The enclosed Registered Ago	nt/Registered Office	e Change and	fec(s) are submitted for filing.			
Please return all corresponde	nce concerning this	matter to the	following:			
Henry L. Corona						
Nan	e of Person					
Impaktu, LLC						
Firm	/Company					
318 NW23rd Street						
Ac	dress					
Miami FL 33127						
City/Sta	te and Zip Code					
Henry@natcomglobal.c	om					
E-mail address: (to be a	ised for future annua	al report notif	ication)			
For further information conc	erning this matter, p	lease call:				
Henry L. Corona		305	756.8600			
Name of Per	son	-	Area Code & Daytime Telephone Number			
STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee. Florida	ions er Circle	Re Di P.(alLING ADDRESS: gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314			
Enclosed is a check	Enclosed is a check for the following amount:					
☑ \$25 Filing Fcc		□ \$£	55 Filing Fee & Certified Copy			

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: Impaktu, LLC	·		
2. (a)	331 East Atlantic Avenue	(b) 331 East Atlantic Avenue		
2. (u)	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Suite 202	Suite 2	202	
	Delrey Beach	Delrey	Beach	
	2/18/2014	M14000	0001139	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Corporation Service Company			
	Registered Agent and Registered Office shown on the records of	the Florida Dept. of S	tate:	
	Registered Office Address (MEST BE FLORIDA STREET)	<u>ADDRESS)</u>	20	
	201 Hays Street		2018	
	Tallahassee	32301-2525		
(b)	Henry L. Corona		JUN 25 AM 8: 19	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	₩ 6 C	
	Impaktu, LLC		# <u> </u>	
	NEW Registered Office Address:		_	
	318 NW 23rd Avenue			
	Miami FL	33127		
the cha agent v was/wo	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members coles of organization or the operating agreement of the	the registered offi ability company, is of the limited liabil	ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in	
		Robert Roc	driguez	
Signat	use of a member of authorized representative of a member		Printed or typed name of signee	
provisi the obl. to mere	by accept the appointment as registered agent and agrouns of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflectly change in the registered office address. It is writing of this change.	performance of m d för in Chapter 6	y duties, and I am familiar with and accept 05. F.S. Or, if this document is being filed	
Ciana atau	re of Negistered Agent			

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00