#866 P.001/002

Division of Corporations

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Florida Department of State

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Division of Corporations

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From:

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.

Nε	ame of the limited liability company:	14 (5 11 + 5) + 1	DENNERY LEG TEXTURE STATE OF THE STATE OF TH
)	200 Liberty St	(b) -	
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	c/c Reinhardt LLP, 27th Floor		
	NEW YORK, NY 10281		
	02/24/2015		M15000001688
	Date of filing/registration in Florida	4,	Document number
)	CORPORATE CREATIONS NETWOR	RK, INC.	
,	Registered Agent and Registered Office shown on the records of the	ie Florida Dept.	of Sinte:
	11380 PROSPERITY FARMS ROAD	#221E	
	Registered Office Address (MUST RE FLORIDA STREET A	DDRESS)	3. 18 19 19 19 19 19 19 19 19
	PALM BEACH GARDENS , FL	33410	FIL MASS
	COGENCY GLOBAL INC.		
-	Enter name of NEW Registered Agent and/or NEW Registered C	Mer address:	TO 50
	115 North Calhoun Street, Suite 4	_1	S
	NEW Registered Office Address:		
	Tallahassee , FL,	32301	<u> </u>
an wi er ic	nited liability company is not organized under the laws age or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of less of organization or the operating agreement of the limited liable of a member of authorized representative of a member of authorized representative of a member of all statutes relative to the proper and complete persons of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	ne registered of the company the limited liability Carlo	office and the business office of the registe, it is hereby confirmed that the change(s) ability company or as otherwise provided in a company. (RIONALITY Frinted or typed name of signee
1	Treflect a change in the registered office address, I he in writing of this change. TACELE ONE AL METTOR AS	reby confirm.	that the limited liability company has been c: ८५७७४५५
	of Registered Agent		J

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