

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

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From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Phone

Fax Number

: (561)694-8107 1 (561)694-1639

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

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## LLC REGISTERED AGENT CHANGE

VXCHNGE HOLDINGS, LLC	
Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

DEC 0 2 2015

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Corporate Filing Menu

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

1. The name of the limited fiability company is: vXeh	nge Holdings, LLC
2. (a) Principal office address of the limited liability comapny:	1501 W CLEVELAND STREET, SUITE 302
(Note: MUST BE STREET ADDRESS)	TAMPA FL 33606
(b) Mailing address of limited liability company:	1501 W CLEVELAND STREET, SUITE 302
(Note: MAY BE POST OFFICE BOX)	
	TAMPA FL 33606
4/24/2015	M15000003147
3. Date of filing/registration in Florida	4. Document number
5.(a) Registered Agent and Registered Office shown	
Registered Agent:	CT CORPORATION SYSTEM
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD
	PLANTATION FL 33324
(b) Enter name of NEW Registered Agent and/or NEW 1	Registered Office address:
NEW Registered Agent:	Corporate Creations Network Inc.
NEW Registered Office Address:	11380 Prosperity Farms Road #221E
(MUST BE FLORIDA STREET ADDRESS)	Palm Beach Gardens FL 33410
an affirmative vote of the members of the limited liability com the operating agreement of the amiled liability company.	<ul> <li>y, it is hereby confirmed that the change(s) was/were authorized by pany or as otherwise provided in the articles of organization or</li> </ul>
(Signature of a member or authorized representative of a member)	
George Pollock (Printed or Types name of signes)	Name to the same t
of all statutes relative in the proper and complete performance in position as registered agent as provided for in Chapter 60, in the segistered office address, I hereby confirm that the limit	e to act in this capacity. I further agree to comply with the provisin e of my duties, and I am familiar with and accept the ubligations of 5, F.S. Or, if this document is being filed to merely reflect a change ed liability company has been notified in writing of this change.
Jessica Morales Special (Signature of Registered Agent)  Division of Corporations P.O.	Secretary Box 6327, Tallahussee, FL 32314
TNHS18(10/99)	00x 0327, 1 anamessee, FL 32314
Corporate Creations International Inc.	
11380 Prosperity Farms Road #221E Palm Beach Gardens FL 33410	
(561) 694-8107	2 <b>2</b>
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