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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 : (561)214-8442 Fax Number

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LLC REGISTERED AGENT CHANGE CONCIERGE AUCTIONS, LLC

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LEB 5 # 5055qloH T. LEMIEUX

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	ame of the limited liability company:	Concierge Auction	is, LLC				 -	• •	
2. (a)	000 Brazos Street, Suite 220			(b) 228 Park Avenue S PMB 70835					
u . (u)	Principal office address of limited liab (Note: MUST BE STREET AL		–	/		ess of limited lial I <i>Y BE POST OF</i>			
	Austin, TX 78701		_	New	York, NY 10003				
			_		·				
	05/03/2017			M170	00003819				
3.	Date of filing/registration in	Florida	1.		Document	number			
5. (a)	Corporate Creations Network Inc.								
), (u)	Registered Agent and Registered Office show	on the records of the	he Florio	la Dept. 1	of State:				
	801 US Highway I								
	Registered Office Address (MUST BE FI	LORIDA STREET A	DDRE.	<u>ss)</u>					
	North Palm Beach	, FL_	33408						
(b)	C T CORPORATION SYSTEM								
•	Enter name of NEW Registered Agent and/o	or <u>NEW Registered</u>	Office a	ddress:					
	1200 SOUTH PINE ISLAND ROAD								
	NEW Registered Office Address:					:	22		
		<u> </u>					ا ا	- .	
	PLANTATION	, FL_	33324				B 23		
change agent v was/w the art	imited liability company is not organice or changes are made, the Florida strewill be identical. Or, in the case of a Fere authorized by an affirmative vote cicles of organization or the operating a	et address of the i Florida limited lial of the members of	registe bility of the li imited	red offi company mited li liabilit	ice and the busin y, it is hereby co lability company	ess office of, to offirmed that for as otherwise	he-r e gis the chan	tered ge(s)	
	ture of a member or authorized representative	of a member				yped name of sig	nee		
l here provis. the ob- to mer	by accept the appointment as registered ions of all statutes relative to the propligations of my position as registered a clay reflect a change in the registered of in writing of this change. Lauren Underwood, S.	ed agent and agre er and complete j agent as provided office address, I h	perform for in ereby (ct in thi. nance o Chapte confirm	s conacity I fur	ther noree to	comply	with the id accep ing filed i been	

Signature of Registered Agent