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Florida Department of State
Division of Corporations
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Division of Corporations
Fax Number : (850) 617-6383

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Account Name : GERALD WEINBERG, P.C.
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

LLC REGISTERED AGENT CHANGE
ECOMM SALES, LLC

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(H18000127615 3)

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. Name of the limited liability company: ECOMM SALES, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

17 ROYAL PALM WAY, UNIT 105

BOCA RATON, FL 33432

JUNE 12, 2017

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

17 ROYAL PALM WAY, UNIT 105

BOCA RATON, FL 33432

M17000004975

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

INCORPORATING SERVICES, LTD.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1540 GLENWAY DRIVE

TALLAHASSEE, FL 32301

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

GARET DELUCA

NEW Registered Office Address:

17 ROYAL PALM WAY, UNIT 105

BOCA RATON, FL 33432

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TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

GARETT DELUCA

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.

Signature of Registered Agent

(H18000127615 3)