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Division of Corporations

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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (813)436-5206

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LLC REGISTERED AGENT CHANGE THE SEVERSON GROUP LLC

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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.

Na	ame of the limited liability company: [The Severson Ground Procedure of the Severson Ground Proced	JP LLC			
!. (a)	310 S Twin Oaks Valley Road	(b) 310 S Twin Oaks Valley Road			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Suite 107-226 San Marcos CA 92078		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
			Suite 107-226 San Marcos CA 92078 M23000015003		
					i.
. (a)	INCORP SERVICES, INC.				
. (147	Registered Agent and Registered Office shown on the records of the				
	3458 LAKESHORE DRIVE				
	Registered Office Address (MUST BE FLORIDA STREET A	TOW MON			
	TALLAHASSEE .FL	32312		HION -8 PH 5: 10 CORRESPONDE L'ANASSEE. FLORID	
(b)	Registered Agents Inc	F. F.			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	07.7			
	7901 4th St N			<u> </u>	
	NEW Registered Office Address:		_ -	-	
	STE 300	· · ·		_	
	St. Petersburg , FL	33702		_	
ne cha gent v ras/we ne arti	mited liability company is not organized under the law nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law of a member or authorized representative of a member of the appointment as registered agent and agree ons of all statutes relative to the proper and complete prigations of my position as registered agent as provided by reflect a change in the registered office address. The	he regicality control the limited Rob	stered office ompany, it in hited liability liability continuous in Jones	e and the business office of the registere is hereby confirmed that the change(s) y company or as otherwise provided in appany. Printed or typed name of signee agaity. I further agree to comply with the	

- Assistant Secretary

David Roberts

Signature of Registered Agent