P01000106540

| (Re | equestor's Name) | |
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| (Ad | (dress) | |
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| (Ad | ldress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Do | cument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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R.A. change

TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations | |
|--|-----------------|
| SUBJECT: Venturcap Financial Group of Florida, Inc. | |
| (Name of corporation) | |
| DOCUMENT NUMBER: P01000106540 | |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | |
| Erin C. Joyce | |
| (Name of person) | |
| Gadsby Hannah LLP | 63 as - |
| (Name of firm/company) | |
| 225 Franklin Street | <u>k</u> _ |
| (Address) | |
| Boston, MA 02110 | ۵. - |
| (City/state and zip code) | |
| For further information concerning this matter, please call: | |
| Erin C. Joyce at (617) 345-6904 | |
| Erìn C. Joyce at (617) 345-6904 (Name of person) (Area code & daytime telephone number) | |
| Enclosed is a \$35.00 check made payable to the Department of State. | |
| Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399 | - |

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| | to the provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida ment of change is submitted for a corporation organized under the laws of the State of | • |
|---------------------|---|---------------|
| of Floria | in order to change its registered office or registered agent, or both, in t | ne State |
| 1. The na | me of the corporation: Venturcap Financial Group of Florida, Inc. | |
| | incipal office address: 615 Reservoir Ave. | |
| | Cranston, RI 02910 | |
| | ailing address (if different): same as above | |
| 4. Date of | f incorporation/qualification: November 5, 2001 Document number: P01000106 | 540 |
| 5. The na Florid | f incorporation/qualification: November 5, 2001 Document number: P01000106 ame and street address of the current registered agent and registered office on file with the Department of State: CT Corporation System 1200 S. Pine Island Rd. | he os |
| | CT Corporation System | |
| | 1200 S. Pine Island Rd. | 700 |
| | Plantation, FL 33324 | 17.00 T |
| 6. The r | ame and street address of the new registered agent (if changed) and /or registered od): Nelson C. Keshen c/o Nelson C. Keshen, P.A. | office (A) |
| | Two Datran Center, Suite 1511, 9130 South Dadeland Boulevard (P.O. Box or personal mailbox NOT acceptable) | |
| | Miami, FL 33156 | |
| | et address of its registered office and the street address of the business office of its rechanged will be identical. | |
| Such characterize | ange was authorized by resolution duly adopted by its board of directors or by an officed by the board, or the corporation has been notified in writing of the change. | cer so |
| (Signature o | an officer, chairman of vice chairman of the board) Jeffrey M. Stoler, Secretary (Printed or typed name and title) | - |
| mertorm | accept the appointment as registered agent and agree to act in this capacity. agree to comply with the provisions of all statutes relative to the proper and comple unce of my duties, and I am familiar with and accept the obligation of my position as a agent. Or, if this document is being filed merely to reflect a change in the register defiss, I hereby confirm that the corporation has been notified in writing of this change in the corporation has been notified in writing of this change. | |
| If signing | (Signature of Registered Agent) (Date) on behalf of an entity: | |
| | (Typed or Printed Name) (Canacity) | |

* * * FILING FEE: \$35.00 * * *