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COVER LETTER

TO: Amendment Section **Division of Corporations** ISA LEHNER PA Name of Corporation **DOCUMENT NUMBER:** 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: Lisa Lehner Name of Contact Person Lipscomb Eisenberg & Baker Firm/Company 2 S Biscavne Blvd PH 3800 Miami, FL 33131 City/State and Zip Code LLehner@lebfirm.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: .isa Lehner Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of ch	ange is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florida Sta tion organized under the laws of the State of <u>22</u> 2 e or registered agent, or both, in the State of Flo	53
	the corporation: Lisa Lehne		riau.
1. The name of	office address: Lipscomb E	Eisenberg & Baker 2 S Biscayne Bl	vd. PH 3800
Miami FL			
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 4/15/2	2004 Document number: P04000	063266
5. The name an		egistered agent and registered office on file with	
	Lisa Lehner		
	169 E Flagler St., Suit	te 1422	
	Miami, FL 33131	•	 1
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
	Lisa Lehner, Esq		(4) (1)
	Lipscomb Eisenberg &	& Baker	
	2 S Biscayne Blvd, Mi	O. Box NOT acceptable	great states
The street address changed will	ess of its registered office and i be identical.	the street address of the business office of its re	egistered agent,
		y adopted by its board of directors or by an off s been notified in writing of the change.	icer so
Sign	Pare	Lisa Lehner, Pres.	·
I hereby accept I further agree performance of agent. Or, if the hereby confirm	the appointment as registered to comply with the provisions of my duties, and I am familiar w is document is being filed mere that the corporation has been	Printed or typed name and title agent and agree to act in this capacity. of all statutes relative to the proper and comple with and accept the obligation of my position as ely to reflect a change in the registered office a notified in writing of this change.	ete s registered address, I
Frai	Ehra/	Aug 18, 2014	
Şig	mature of Registered Agent	Date	
If signing on be	chalf of an entity:		
T	yped or Printed Name	_	

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