

Division of Corporations Page 1 of 1  
**P11000009378**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC  
Account Number : I20070000020  
Phone : (813) 435-3176  
Fax Number : (813) 333-6358

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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**REGISTERED AGENT CHANGE  
A MARKETING FORCE INCORPORATED**

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NICK SPRADLIN

11/07/2030 03:49 FAX 8133336358

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: A MARKETING FORCE INCORPORATED
2. The principal office address: 20533 BISCAYNE BLVD SUITE 344  
AVENTURA FL 33180 US
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 01/27/2011 Document number: \_\_\_\_\_
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)  
THE LAW OFFICES OF NICK SPRADLIN, PLLC  
12000 N. DALE MABRY HWY STE 110  
TAMPA, FLORIDA 33618
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
MARC ABRAMS  
20533 BISCAYNE BLVD SUITE 344  
P.O. Box NOT acceptable  
AVENTURA FL 33180 US

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Marc Abrams  
Signature of an officer or director

MARC ABRAMS PRESIDENT  
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Marc Abrams  
Signature of Registered Agent

10-29-2012  
Date

If signing on behalf of an entity:

MARC ABRAMS  
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (03/12)

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