

P/3000018510

Division of Corporations

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

From: Account Name : FOX ROTHSCHILD LLP
Account Number : I20130000024
Phone : (215) 299-2162
Fax Number : (215) 299-2150

****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
LA BOCA INVESTMENTS, INC.

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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11/13/13

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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: LA BOCA INVESTMENTS, INC.
2. The principal office address: C/O 1200 S PINE ISLAND ROAD, #250
PLANTATION, FLORIDA 33324
3. The mailing address (if different): SAME AS PRINCIPAL ADDRESS
4. Date of incorporation/qualification: 02/26/2013 Document number: P13000018510
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)

REGISTERED AGENT CORPORATE SERVICES, INC.355 ALHAMBRA CIRCLE, SUITE 801CORAL GABLES, FL 33134

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

CT CORPORATION SYSTEM1200 S PINE ISLAND ROAD, #250P.O. Box NOT acceptablePLANTATION, FLORIDA 33324

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.

Signature of an officer or directorThomas F. Quaker, DirectorPrinted 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.

Signature of Registered AgentAssistant Secretary11/7/2013Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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