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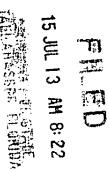
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COVER LETTER

Amendment Section

TO:

Division of Corporations
SUBJECT: AGC Property Maintenance Corpo Name of Corporation
DOCUMENT NUMBER: P 13000029853
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:
Annett T. Block Name of Contact Person Flonda Connech Inc. Firm/Company 22
Flonda Connech Inc.
P.O. Box 772568 Address Pompano Beacle, Fr. 33077 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Annelf T. Blocke at (954) 543-1794 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 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: AGC Property Maintenance Corpo
2. The principal office address: Shaftlern Fr. \$4 Hunich, \$1371
3. The mailing address (if different): P.O. Box 772568 Pompano Beach FC 33077
4. Date of incorporation/qualification: 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)
Florida Connecto Inc.
3030 N. Roches Point Dr. Ste 1504
Tampa, FC 33077
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
REGISTERED AGENTS INC.
3030 N. Rocky Point Drive, STE 150A
P.O. Box NOT acceptable
Tampa, FL 33607
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 director Annet 7. Block / Florido Connac 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.
Signature Registered Agent Date
If signing on behalf of an entity:
Bill Havre - President 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 CR2E045 (03/12)