P13000074887

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Converde Energy Science, Inc.

Name of Corporation

P13000074887

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:

Scott Rowan

Name of Contact Person

Converde Energy Science, Inc.

Firm/Company

One Progress Plaza, Suite 2300

Address

St. Petersburg, FL 33701

City/State and Zip Code

slr@converdegroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Rowan

.801

319-4882

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

	provisions of sections 607.0502, 617.0502 inge is submitted for a corporation organi			this	
	r to change its registered office or registe				
1. The name of	the corporation: Converde Energ	y Science, Inc.			
2. The principal	office address: One Progress Pla	aza, Suite 2200, 200 Ce	entral A	\ve.,	J
St. Peter	sburg, Florida 33701				
3. The mailing a	address (if different): Same				
4. Date of incor	poration/qualification: 10/10/2013	Document number: P130	00074	887	
5. The name and	d street address of the current registered agreement of State: (If resigned, enter resigned		vith the		
	Rowan, Scott L		_		
	3164 67th Terrace S		_		
	St. Petersburg, Florida 3371	2	_		
6. The name and street address of the new registered (if changed):		t (if changed) and /or registered o	ffice	13 DEC	SECTION OF THE PROPERTY OF THE
	Converde Group, LLC		_) -9	
	One Progress Plaza, Suite 2	<u> </u>	_	<u>_</u>	100
	St. Petersburg, Florida 3370	•	_	11:47	SIME
The street address changed will	ess of its registered office and the street a be identical.	address of the business office of i	its registe	red ag	ent,
` ^	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an ified in writing of the change.	officer s	0	
Strk) วพณ—	Scott L. Rowan			
Signatu	re of an officer or director	Printed or typed name and ti			_
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and to comply with the provisions of all statu my duties, and I am familiar with and ac is document is being filed merely to refle that the corporation has been notified in	l agree to act in this capacity, tes relative to the proper and coincept the obligation of my position of a change in the registered officering of this change.	mplete on as regi ce addres	stered ss, I	,
St	Por-	12/4/2013			
Sig	nature of Registered Agent	Date			_
If signing on be	half of an entity:				
Scott L. Ro					
T	yped or Printed Name				

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

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