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TO: Amendment Section Division of Corporations

SUBJECT: EXPERTEDGE CONSULTING 6 ROUP
Name of Corporation

CORP

DOCUMENT NUMBER: P 2 4 00000 3647

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:

Name of Contact Person

EXPERTED GE

Firm/Company

IS13 MOFFETT ST

Address

HOLLY WOOD, FL 33020

City/State and Zip Code

CAISTIN A GOLDSTEIN CONSULTING 6 Rough

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

For further information concerning this matter, please call:

CRISTING PRIS 60 at (954) 205 2963

Name of Contact Person at (954) 205 2963

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)

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: EXPERTED GF CONSULTING GROUP 2. The principal office address: 2980 NE 20745 ST COR STE. 300 A Jentura FL 33180
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: Document number: P 24 00000 364
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)
1513 MOFFETT ST HOLLYWOOD FL 33020 SCOTT A. ORTH
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
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.
NATAL GOLDS TEIN Summare of all Officer of director Printed of 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 further agree to comply with the provisions of all statutes relative to the proper and complete performance 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 Agent If signing on behalf of an entity:
Typed of Printed Name Typed of 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 (04/13)