1000032014

HANZMAN CRIDEN KORGE & CHAYKIN, P.A.

FIRST UNION FINANCIAL CENTER

SUITE 2100

Foreign

Limited Partnership

Reinstatement

Trademark

Other

200 SOUTH BISCAYNE BOULEVARD MIAMI, FLORIDA 88181

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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RA Chg.

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Examiner's Initials

Fictitious Name

Name Reservation

Florida Department of State, Jim Smith, Secretary of State

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. Elorida Statutes, the undersigned corporation organized under the laws of the State of submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. East European I 1a. The name of the corporation is:-1b. Date of incorporation 4125 94 Document number 19400032014 2. The name and address of the current registered agent and office: Dorpus Christi, YEXas 78418. 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) Esquiru 1310d, Suite 2100, The street address of its registered agent 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. SIGNATURE lune HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 COM-PLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT. SIGNATURE (Registered Agent) DATE

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$35.00

CR2E045 (7-91)