I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NEVIN C THOMAS

Electronic Signature of Signing Officer/Director Detail

Name and Address of Current Registered Agent: THOMAS, NEVIN C.

Current Principal Place of Business:

3518 TANGIER TERRACE SARASOTA, FL 34239 US

FEI Number: 59-2410723

DOCUMENT# H03903

C/O NEVIN C. THOMAS 100 WALLACE AVE., STE.111 SARASOTA, FL 34237

Current Mailing Address: C/O NEVIN C. THOMAS 100 WALLACE AVE., STE.111 SARASOTA, FL 34237

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

PST Title THOMAS, NEVIN C. Name 100 WALLACE AVE STE 111 Address City-State-Zip: SARASOTA FL 34237

Entity Name: COMMERCIAL MANAGEMENT & LEASING CORPORATION

FILED Feb 19, 2015 Secretary of State CC1143489818

Certificate of Status Desired: No

02/19/2015

Date