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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

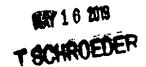
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## REGISTERED AGENT CHANGE ONLINE CONSULTING, INC.

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## COVER LETTER

TO: Amendment Section Division of Corporations

⊕ 05/15/2019 12:20 PM

Online Consulting, Inc. F09000004317

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:

Mary Castillo Registered Agent Solutions, Inc. Firm/Company 1701 Directors Blvd, Ste 300 Address Austin, TX 78744 City/State and Zip Code notices@rasi.com

For further information concerning this matter, please call:

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

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

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR **BOTH FOR CORPORATIONS**

statement of cha	provisions of sections 607.0502, 617.050 unge is submitted for a corporation organ er to change its registered office or regist	nized under the law	vs of the State of	<u>Delawa</u>		-
2. The principal	the corporation: Online Consult office address: 500 CARR RD. NGTON, DE 19809	ing, Inc. ., SUITE 10	00			
3. The mailing a	address (if different):					
4. Date of incor	poration/qualification: 11/2/2009	Document r	umber: F090	00004	1317	7
	d street address of the current registered a rtment of State: (If resigned, enter resigned CORPORATION SE	ed)				
	1201 HAYS STREET			. <i>5</i> 0		
	TALLAHASSEE,	FL	32301	12 A	19 HAY	10
6. The name and (if changed):	d street address of the new registered age	nt (if changed) and	l /or registered of	meg A	2	
	Registered Agent Solutions,	Inc.		າ <u>ກີ</u> ເຕີກ	AM 9: 4.	Ü
	155 Office Plaza Dr., Suite A			STATE	: 47	
	Tallahassee, FL 32301	F acceptable				
The street address changed will	ess of its registered office and the street l be identical.	address of the bus	siness office of it	ts register	ed age	ու
Such change wa authorized by the	as authorized by resolution duly adopted he board, or the corporation has been no	d by its board of detified in writing o	rectors or by an f the change.	officer so	,	
/s/ James	Palic use of an officer or director	James Pa	IIIC	President		
I hereby accept I further agree performance of agent. Or, if th	t the appointment as registered agent an to comply with the provisions of all stat f my duties, and I am familiar with and is document is being filed merely to refi that the corporation has been notified i	d agree to act in t utes relative to the accept the obligati ect a change in th	his capacity. e proper and con on of my position e registered offic hange.	nplete n as regist	tered ;, I	
•	ehalf of an entity:	00/10/20	Date			-
Justine Karr						
Т	Typed or Printed Name					