

LO70000 98035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

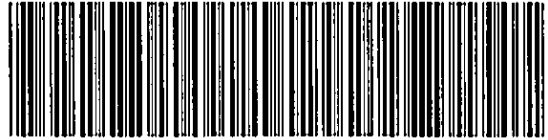
(Business Entity Name)

(Document Number)

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2020 SEP 23 AM 10:34  
TALLAHASSEE, FL  
CLERK OF SUPERIOR COURT

JA 10/27/20

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Fraudsolvers LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent Registered Office Change and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sam Gutman

Name of Person

Fraudsolvers

Firm/Company

PO Box 401

Address

Mulberry FL 33560

City, State and Zip Code

smgutman@fraudsolvers.com

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

For further information concerning this matter, please call:

Sam Gutman

321

696 1333

at ( )

Name of Person

Area Code & Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**Enclosed is a check for the following amount:**

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Fraudsolvers LLC

2. (a) Registered Agents Inc (b) Fraudsolvers  
 Principal office address of limited liability company: Mailing address of limited liability company  
*(Note: MUST BE STREET ADDRESS)* *(Note: MAY BE POST OFFICE BOX)*  
7901 4th St N, STE 300 PO Box 401  
St. Petersburg, FL 33702 Mulberry, FL 33860

3. 9/12/2020 4. 1.07000098035  
 Date of filing/registration in Florida Document number

5. (a) GUTTMAN, SAM  
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address: *(MUST BE FLORIDA STREET ADDRESS)*  
3724 HEIRLOOM ROSE PLACE  
OVIEDO, FL FL 32766

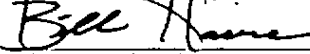
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 2020 SEP 23 AM 10:34  
 SECRETARY OF STATE  
 TALLAHASSEE, FL

(b) Bill Havre  
 Enter name of NEW Registered Agent and/or NEW Registered Office address:  
Registered Agents Inc.  
NEW Registered Office Address:  
7901 4th St. N, STE 300  
St. Petersburg FL 33702

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

 Sam Guttman  
 Signature of a member or authorized representative of a member Printed or typed name of signee

*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 duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

  
 Signature of Registered Agent