L18000171788

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
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Office Use Only



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COVER LETTER

TO:	Registration Section Division of Corporations		▲ \$\dot{4}
C11 1 8 1 1	Brenta	ano's Consulting,	LLC
SORI	JECT: N	ame of Limited Liab	oility Company
Dear :	Sir or Madam:		
The e	nclosed Registered Agent/Registered C	Office Change and fe	e(s) are submitted for filing.
Please	e return all correspondence concerning	this matter to the fol	llowing:
Jose	ph H. Littky		
	Name of Person		•
	Firm/Company		
4544	Mediterranean Circle		
	Address		•
Palm	n Beach Gardens, Florida 33418		
	City/State and Zip Code	•	•
joseį	phlittky@gmail.com		
	E-mail address: (to be used for future a	innual report notifica	ation)
For fi	urther information concerning this matter	er, please call:	
Jose	ph H. Littky	561 at (385-4131
	Name of Person		Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regis Divis P.O.	LING ADDRESS: stration Section tion of Corporations Box 6327 hassee, Florida 32314
	Enclosed is a check for the followi	ng 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.

INU	me of the limited liability company:	no's Consu					-
(a)	6586 Hypoluxo Rd, #336		(b)	6586 Hy	/poluxo R	d, #33	6
,	Principal office address of limited liability comp. (Note: MUST BE STREET ADDRESS)	any;	, ,	3	•		ted liability company: ST OFFICE BOX)
	Lake Worth, FL 33467			Lake Wo	orth, FL 3		
	Date of filing/registration in Florida	4		•	Document	number	
(a)	Joseph H. Littky						
,	Registered Agent and Registered Office shown on the re	eords of the F	orida l	Dept. of State	- e:		
	Registered Office Address (MUST BE FLORIDA ST	TREET ADDI	RESS)		_		
	West Palm Beach	FL_334	101		-		
b)	Joseph H. Littky				<u> </u>	233	
.,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Re</u>	egistered Offic	e add	ress:	K I AMADƏLE	2913 OCT 1	7
	NEW Registered Office Address:					G3	
	4544 Mediterranean Circle				- E	ئن <u>آق</u>	U
	Palm Beach Gardens	FL_334	118			ଥିବ	
cha nt v /we	imited liability company is not organized under inge or changes are made, the Florida street add will be identical. Or, in the case of a Florida line are authorized by an affirmative vote of the medicles of organization or the operating agreemen	dress of the nited liabili mbers of the t of the limi	regist ty cor Limi ted li	ered office npany, it is ted liabilit	e and the bus hereby co y company npany.	isiness (nfirmed	office of the regist I that the change(s
_	// U//		OIdi	INOH DIE	iitaiiU		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

fied in Miting of this change.

nature of Registered Agent