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

DMML

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

	INTERACTIVE SOLUTIONS, LLC
(b)	
(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
22	21 W. Hallandale Beach Blvd., Suite 119
	allandale Beach, FL 33009
LO	000006442
4.	Document number
The Florida Dep	ot. of State:
ES LLC	
ADDRESS)	
25	: 1
, 33134	
L	
	19 17
d Office address	1 1
	9 02
	· 2
	
33129	
f the registered in the registered in the limited similar of the lin	e of Florida, it is hereby confirmed that after d office and the business office of the registered my, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company. Management, LLC Printed or typed name of signee his capacity. I further agree to comply with the of my duties, and I am familiar with and accept for 505, F.S. Or, if this document is being filed m that the limited liability company has been
	4. The Florida Dep ES LLC ADDRESS 33134 GOMes address the registere ability compa of the limited liablity MCOA

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

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