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## · COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: E-Suite Strategies, LLC (Name of	Limited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning the	his matter to the following:	
Amy W. Edwards (Name of Person)	<del></del>	
E-Suite Strategies, LLC (Firm/Company)		
10101 Belgrave Rd (Address)	1	
Tampa, FL 33626 (City/State and Zip Code)	<del></del>	
For further information concerning this matter	r, please call:	
Amy W. Edwards (Name of Person)	at (813) 712-0235 (Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
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 608.416 or 608.508, 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.

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1. Name of the limited liability company: E-Suite	Strategies, LLC
(a) Principal office address of limited liability company: 10101 Belgrave Rd  (Note: MUST BE STREET ADDRESS) Tampa, FL 33626	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	10101 Belgrave Rd Tampa, FL 33626
5/29/07	L07000056961
3. Date of filing/registration in Florida	4 Document number
5. (a) Registered Agent and Registered Office shown Registered Agent:	
Registered Office Address:	10101 Belgrave Rd Tampa, FL 33626
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	NEW Registered Office address:  Amy W. Edwards
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	10101 Belgrave Rd
	Tampa,FL_33626
that after the change or changes are made, the Florida office of the registered agent will be identical. Or, in t	the laws of the State of Florida, it is hereby confirmed street address of the registered office and the business the case of a Florida limited liability company, it is zed by an affirmative vote of the members of the limited les of organization or the operating agreement of the
Amy W. Edwards (Printed or typed name of signee)	<del></del>
	and agree to act in this capacity. I further agree to ne proper and complete performance of my duties, and I ition as registered agent as provided for in Chapter 608, ct a change in the registered office address, I hereby tified in writing of this change.

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