## 108000076341

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## **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT:	Finance and Strategic Consultants, LLC  Name of Limited Liability Company				
SUBJECT.					
Dear Sir or I	Madam;				
The enclosed	d Registered Agent/Registered Off	ice Change a	and fee(s) are submitted for filing.		
Please return	all correspondence concerning th	is matter to t	he following:		
Susan We	eisman				
	Name of Person	_	<del></del>		
	Firm/Company	<u>-</u>	<del></del>		
600 West	Las Olas Blvd. #2001				
	Address		<del></del>		
Fort Laude	erdale, FL 33312				
	City/State and Zip Code				
susanwcp	a@aol.com				
E-mail	address: (to be used for future ann	ual report no	otification)		
For further i	nformation concerning this matter,	please call:			
Susan We	isman	954 at (	707-9367		
	Name of Person	(	Area Code & Daytime Telephone Number		
Regi Divi Clift 2661	REET/COURIER ADDRESS: istration Section sion of Corporations on Building I Executive Center Circle ahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Encl	losed is a check for the following	amount:			
<b>12</b> 1 \$2	25 Filing Fee		\$55 Filing Fee & Certified Copy		
INHS18 (2/14	<b>l</b> )				

## 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. Na	me of the limited liability company: Finance and Strategic Consultants, LLC					
2. (a)		(1	b)			
` '	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	Mailing address of limited liability company:			
	600 West Las Olas Blvd. #2001		(Note: MAY BE POST OFFICE BOX) 600 West Las Olas Blvd. #2001			
	Fort Lauderdale, FL 33312		Fort Lauderdale, FL 33312			
	4/3/18		L08000076341			
3.	Date of filing/registration in Florida	4.	Document number			
5. (a)	Susan Weisman					
·· ()	Registered Agent and Registered Office shown on the records of	the Florid	Dept. of State:			
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES				
	816 Hampton Court	ADDRES.				
	Weston	33326		। 		
	, FL			1 1		
(b)	Enter name of NEW Registered Agent and/or NEW Registered		්			
	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	1 1		
			<del>e</del>	<b>(</b> )		
	NEW Registered Office Address:					
	600 West Las Olas Blvd. #2001					
	Fort Lauderdale	33312				
			<del></del>			
II the I the cha	limited liability company is not organized under the law range or changes are made, the Florida street address of	ws of the the regi	State of Florida, it is hereby constered office and the business of	nfirmed that after fice of the registered		
agent v	will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members of	ability c	ompany, it is hereby confirmed the	hat the change(s)		
the arti	igles of organization or the operating agreement of the	limited	itability company.	nwise provided in		
$\geq$	Sudar Wagna	Su	san Weisman			
Signa	ture of a member or authorized representative of a member		Printed or typed name o	f signee		
provisi the obl to mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provide liw reflect a change in the registered office address, I din writing of this phange.	ree to ac perform d for in hereby c	in this capacity. I further agree ance of my duties, and I am fami Chapter 605, F.S. Or, if this doc onfirm that the limited liability c	e to comply with the iliar with and accept ument is being filed company has been		
$\preceq$	TING WILLIAMS					

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 F1LING FEE: \$25.00