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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone : (855)330-1010 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:	

## LLC REGISTERED AGENT CHANGE **IDENTIGI LLC**

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## 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.

i. Na	me of the limited liability company: Ident	igi LLC						
) (a)	2501 Brickell Ave Apt 1205	(t	PO Box	228752				
. (u)	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	·	Ma	illing address of limited liability company:  Note: MAY BE POST OFFICE BOX)				
	Miami FL 33129		Miami FL	33222				
	01/16/2009		L0900000	)5320				
3.	Date of filing/registration in Florida	4.		Document number				
5. (a)	CORPDIRECT AGENTS, INC							
J. (u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
	1200 South Pine Island Road							
	Registered Office Address (MUST BE FLORIDA S	TREET ADDRES.	5)	2020 MAY				
	MIAMI	, <sub>FL</sub> 3332	4	17 12				
(b)	Northwest Registered Age	P						
(0)	Enter name of NEW Registered Agent and/or NEW Registered Agent							
	7901 4th St N							
	NEW Registered Office Address:							
	STE 300							
	St. Petersburg	<sub>. FL</sub> 3370	2					

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.

Margam John	Morgan Noble		
Signature of 9 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 the change.

Signature of Registered Agent