## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## LLC REGISTERED AGENT CHANGE PENTON CONSULTING, LLC

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DEPARTMENT OF STATE
INSIGN OF CORPORATE

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Corporate Filing Menji

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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.

Name of the limited liability company:     Penton Consulting, LLC				
2. (a)	708 SE 15th Street	(b) 708 SI	(h) 708 SE 15th Street	
()	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Unit 3	Unit 3		
	Fort Lauderdale, FL 33315	Fort La	uderdale, FL 33315	
	01/15/2010	L10000	005524	
3.	Date of filing/registration in Florida Andrea Penton	114.	. Document number	
Registered Agent and Registered Office shown on the records of the Florida Pept. of State:  708 SE 15th Street  Registered Office Address				
( <b>b</b> )	Corporate Creations Network Inc.	، <del>ب</del> َ	AND SECTION OF THE PROPERTY OF	
Enter name of NEW Registered Agent and/or NEW Registered Office address:				
	11380 Prosperity Farms Rd. #221E			
	NEW Rugistered Office Address:		9 27 07/15 07/15/A	
	Palm Beach Gardens .	, <sub>FL_</sub> 33410	<del>-</del>	
the cha agent v was/we	imited liability company is not organized under the unge or changes are made, the Florida street addrewill be identical. Or, in the case of a Florida limitere authorized by an affirmative vote of the members of organization of the operating agreement of	ess of the registered offi ed liability company, it pers of the limited liability	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in	
Acudra Racical Attorney-in-Fact				
Signa	ture of a member or authorized representative of a member	<del></del> ,	Printed or typed name of signee	
I here provisi the oblito mer notifie	by accept the appointment as registered agent an ons of all statutes relative to the proper and comigations of my position as registered agent as property reflect a change in the registered office address of this change.	•	spacity. I further agree to comply with the y duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been	
Signature of Registered Agent				
Saixlin Racicot, Special Secretary  Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				

FILING FEE: \$25.00

INHS18 (2/14)