

Division of Corporations

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : TRIAN PROFESSIONAL SERVICES COA
Account Number : I2016000009
Phone : (770)777-2091
Fax Number : (770)220-1943

****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
FALCON CONSULTING GROUP, LLC**

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

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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.

1. Name of the limited liability company: Falcon Consulting Group, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
510 Thornall Street, Suite 250
Edison, NJ 08837

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
510 Thornall Street, Suite 250
Edison, NJ 08837

3. August 23, 2010 Date of filing/registration in Florida
 4. L10000088031 Document number

5. (a) Brendan Downing
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
1100 S Miami Avenue, #1511
Miami, FL 33131

(b) Corporation Service Company
 Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
1201 Hays Street
Tallahassee, FL 32301

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.

Rick Custodio

Rick Custodio

Signature of a 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 this change.

/s/Deb Reeves

Signature of Registered Agent Asst Vice President of CSC

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

STATEMENT OF 20170011890

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