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SECRETARY OF STATE
MALL AHASSES ELOSINA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Greenfield Analytics LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mel Haynes Sr

Name of Person

Greenfield Analytics LLC

Firm/Company

32415 Fern Parke Way

Address

Fernandina Beach, FL 32034

City/State and Zip Code

melsr@greenfield-analytics.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mel Haynes Sr

₃₁,904

432-3302

Name of Person

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.

-	·		
I. Na	me of the limited liability company: Greenfield Analytics I	LC	
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	32415 Fern Parke Way Fernandina Beach Ft, 32034	
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	32415 Fern Parke Way Fernandina Beach FL 32034	
12/22/2	010	L10000130281	
3. Da	tte of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida	Dept. of State:
	Registered Agent:	Corporation Service Company	
	Registered Office Address:	1201Hays St Tallahassee, FL 32301	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV NEW Registered Agent</u> :	V Registered Office add	7013 NOV -5 SECREDARY SECREDARY
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	32415 Fern Parke Way Fernandina Beach, FL 32034	F. STATE
confir and th liabili the me the op	limited liability company is not organized under the lamed that after the change or changes are made, the Flate business office of the registered agent will be identity company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise perating agreement of the limited liability company.	orida street address of th cal. Or, in the case of a was/were authorized by	e registered office Florida limited an affirmative vote of
	or typed name of signce when the sign of the appointment as registered agent and any with the provisions of all statutes relative to the proving any familiar with and accept the onligations of my poster 608, F.S. Or, if this document is being filed to merses, I hereby confirm that the limited liability company	ree to act in this capaci per and complete perfor sition as registered agen rely reflect a change in to has been notified in wri	ty. I further agree to mance of my duties, t as provided for in he registered office ting of this change.
Signatu	ire of Registered Agent		

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