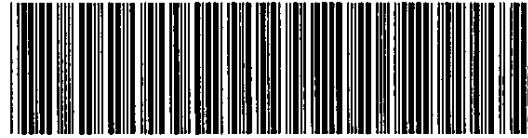


L11000039526



300294891733

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

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D. SCOTT  
FEB 2 2017

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 3B Consulting Solutions

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:

Gail Bovy

Name of Person

3B Consulting Solutions

Firm/Company

4969 Highwood Circle

Address

Middleton WI 53562

City/State and Zip Code

gail.bovy@gmail.com

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

For further information concerning this matter, please call:

Gail Bovy

Name of Person

at ( 515 ) 3396122

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

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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: 3B Consulting Solutions

2. (a) 4969 Highwood Circle Middleton WI 53562 (b) 4969 Highwood Circle Middleton WI  
Principal office address of limited liability company: Mailing address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)* *(Note: MAY BE POST OFFICE BOX)*

3. 04/01/2011 Date of filing/registration in Florida 4. L11000039526 Document number

5. (a) Corporation Service Company  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Corporation Service Company  
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
1201 Hays St  
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

(b) Registered Agents Inc.  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Registered Agents Inc.  
NEW Registered Office Address:  
3030 N. Rocky Point Dr. STE 150A  
Tampa, FL FL

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.

Gail Bovy Signature of a member or authorized representative of a member  
Gail Bovy 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.*

Bill Havre Bill Havre / Assistant Secretary  
Signature of Registered Agent