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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:	
10.	Division of Corporations
	Fax Number : (850)617-6383
r	
from:	Account Name : REGISTERED AGENTS INC.
	Account Number : IZ0090000081
	Phone : (307)200-2803 Fax Number : (855)330-1010

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LLC REGISTERED AGENT CHANGE SG STRATEGIC SOLUTIONS 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.

N	ame of the limited liability company: \underline{S}	G Strategic Solui	tions, LLC	
(a)	3014 GOLDEN EAGLE DR	(b) 3014	(b) 3014 GOLDEN EAGLE DR	
,	Principal office address of limited liabili (Note: MUST BE STREET ADD	*	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	TALLAHASSEE, FL 32312	TALL	AHASSEE, FL 32312	
	12/16/2011	L1100	00141126	
	Date of filing/registration in Fl	orida 4.	Document number	
(a)	UNITED STATES CORPORATION	ON AGENTS, INC.		
(14)	Registered Agent and Registered Office shown of	on the records of the Florida Dept. of	State	
	13302 WINDING OAK COU	RT		
	Registered Office Address (MUST BE FLO	RIDA STREET ADDRESS)		
	SUITE A			
	TAMPA	_{. FL} 33612		
(b)	Northwest Registered	Agent, LLC.		
	Enter name of <u>NEW Registered Agent</u> and/or ?	EW Registered Office address.		
	7901 4th St N			
	NEW Registered Office Address.			
	STE 300			

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.

Morgan John	Morgan Noble
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.

Therefore, Assistant Secretary

Signature of Registered Agent