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COVER LETTER

TO:	Registration Section Division of Corporations					
SURII	Leadershift Consulting LLC					
Name of Limited Liability Company						
Dear S	ir or Madam:					
The er	closed Registered Agent/Registered Off	ice Change and f	ee(s) are submitted for filing.			
Please	return all correspondence concerning th	is matter to the fo	ollowing:			
Jasor	n R. Goldberg					
	Name of Person		_			
Lead	ershift Consulting LLC					
_	Firm/Company		_			
3032	Bristol Creek Drive #106					
	Address					
Morri	sville, NC 27560					
	City/State and Zip Code	<u>-</u>	_			
jason	@MEometry.com					
F	E-mail address: (to be used for future ann	ual report notific	cation)			
For fu	rther information concerning this matter.	please call:				
Jasor	n R. Goldberg	321 at (2303636			
-	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	Reg Divi P.O	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassee, Florida 32314			
Enclosed is a check for the following amount:						
	■ \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy			

INHS18 (2/14)

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. N	ame of the limited liability company: Leadershift C	Consultin	g LLC					
2. (a)	3032 Bristol Creek Drive	(b)	(b) 3032 Bristol Creek Drive					
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		, <u></u>	N	Mailing address of limited liability co			
	#106		#106					
	Morrisville, NC 27560	<u>.</u>	Morri	svill	e, NC 27560			
	8/13/2012		L1200	010	4124			
3.	Date of filing/registration in Florida	4.			Document number			
5. (a)	Jason R. Goldberg							
(,	Registered Agent and Registered Office shown on the records of Jason R. Goldberg	f the Florida	Dept. of	State	:			
	Registered Office Address (MUST BE FLORIDA STREET) 5326 Tattinger Lane	ADDRESS						
	Oviedo, FI	32765				14	2.85	
(b)	Enter name of NEW Registered Agent and/or NEW Registered REGISTERED AGENTS INC	d Office add	iress:			JUN 23 F.1 4	FILED WAY OF ST	
	NEW Registered Office Address:					<u>-</u>	-m .1.1. 171	
	3030 N. Rocky Point Drive, STE 150A					-		
	Tampa, FI	_33607						
the ch agent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	f the regis iability co of the lim e limited l	tered of mpany, ited liab	ffice it is oility com	and the business office of the hereby confirmed that the ch company or as otherwise pro- pany.	regis	tered	
Sign	ature of a member or authorized expresentative of a momba				Printed or typed name of signee			
provis the ob to mei	By accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I din writing of this change	ree to act e performe ed for in C hereby co	in this (ince of l hapter onfirm t	capa my a 605, hat t	wity. I further agree to comp luties, and I am familiar with F.S. Or, if this document is the limited liability company I	ly with and a being ias be	n the ccept filed en	
Signati	ure of Registered Agent	Dan K	een	_	President			