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COVER LETTER

TO: Registration Section Division of Corporations	•						
SUBJECT: LANZATEK CONSULTING SERVICES, LLC Name of Limited Liability Company							
The enclosed Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter	er to the following:						
ISIDRO ROBAYNA							
Name of Person							
LANZATEK CONSULTING SERVICES, LLC							
Firm/Company							
3395 SHADY RUN ROAD							
Address							
City/State and Zip Code							
•							
MELBOURNE, FL 32934 E-mail address: (to be used for future annual rep.	ort notification)						
•							
For further information concerning this matter, please	call:						
ISIDRO ROBAYNA at (321 432-2785						
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						
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. Na	Name of the limited liability company: LANZATEK CONSULTING SERVICES, LLC					
2. (a)	3395 SHADY RUN ROAD	(h	3395 SI	HADY RUN ROA	AD	
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0		Mailing address of limi (Note: MAY BE PO)	ited liability company:	
	MELBOURNE, FL 32934	_ _	MELBO	URNE, FL 3293	4	
	NOV 8, 2016 1/28/13		LIE	300001384	03	
3. 5. (a)	Date of filing/registration in Florida ISIDRO ROBAYNA	4.		Document number	r	
). (a)	Registered Agent and Registered Office shown on the records of t	he Florida	Dept, of Stat	– te:		
	3395 SHADY RUN ROAD 4295 Wir	idov.	er Wa	ay		
	Registered Office Address			- J		
	MELBOURNE	32934		-		
	, rL			_		
(b)					<u>ਨ</u>	
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			_	35	
		ı				
	3395 Shady Run Koad			_	3 4	
	NEW Registered Office Address:				94:12:46 PH 12:46	
				·	46	
	Melbourne ,FL	32	934			
I&AL - 1		C.1	Ct. t. CEI			
the cha	imited liability company is not organized under the law inge or changes are made, the Florida street address of	the regis	stered offic	e and the business	office of the registered	
	will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members o					
	cles of organization or the operating agreement of the				.nerwise provided in	
-	John Phy	ISIE	DRO ROE	ЗАҮМА		
Signa	ture of a member or authorized representative of a member			Printed or typed name	e of signee	
provisi the obl to mere	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete igations of my position as registered agent as provided ly reflect a change in the registered office address, I had in writing of this change.	perform	ance of my	duties, ånd I am fa	miliar with and accept	
Signatu	re of Registered Agent					

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