## 1130000 26668

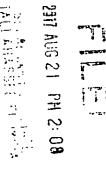
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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EM PARRIE

## COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	PGI CONSULTING LLC					
	Name of Limited Liability Company					
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.				
Please	return all correspondence concerning this ma	atter to the following:				
AUL	MERCADAL					
	Name of Person					
ORANGE BUSINESS SOLUTIONS INC						
	Firm/Company	<del></del>				
1444	BISCAYNE BLVD SUITE 212					
	Address					
MIAN	/II, FL 33132					
	City/State and Zip Code					
COR	P976@GMAIL.COM					
E	-mail address: (to be used for future annual i	report notification)				
For fur	rther information concerning this matter, plea	ase call:				
JUAN	I MERCADAL	305 417-9919				
	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				
INHSI	8 (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. 1	Name of the limited liability company: PGI CONSUI	LTING LLC	
2. (a	PGI CONSULTING LLC	(b) PGI CO	ONSULTING LLC
(u	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	162 NE 25th St # 715	162 NE	25th St # 715
	MIAMI, FL 33137	MIAMI,	FL 33137
	02/18/2013	L130000	026668
3.	Date of filing/registration in Florida	4.	Document number
5. (a	Accounting & Business Consulting		
J. (	Registered Agent and Registered Office shown on the records of	the Florida Dept. of Sta	ate:
	Accounting & Business Consulting		
	Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRESS)</u>	
	2655 LE JEUNE ROAD, STE. 804		
	CORAL GABLES . FL	_33134 	
(b)	ORANGE BUSINESS SOLUTIONS INC		29H AUG 2 SLUE AHASS
ζ	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office address:	<u> </u>
	ORANGE BUSINESS SOLUTIONS INC		- PH FF
	NEW Registered Office Address:		2: 0 <b>3</b>
	1444 BISCAYNE BLVD SUITE 212	. <u>.</u>	
	MIAMI	33132	_
the cl agent was/v	limited liability company is not organized under the landange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited linere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	f the registered officiability company, it of the limited liability.	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in impany.
Sign	nature of a number or authorized representative of a member	ANA W. JUL	Printed or typed name of signee
I her provi the or to me notifi	reby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change.	ree to act in this ca e performance of my ed for in Chapter 60 hereby confirm tha	pacity. I further agree to comply with the