## L13000149952

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(Address)			
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R. HUNT (28/23/23

## COVER LETTER

Division of Corporations		
Urgent Response Training, LLC SUBJECT:		
Nam	ne of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.	
Please return all correspondence concerning thi	s matter to the following:	
Abid Chaudhry		
Name of Person		
Urgent Response Training, LLC		
Firm/Company		
7365 SW 117th Avenue		
Address		
Miami, FL 33183		
City'State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
accounting@eta.edu		
E-mail address: (to be used for future ann	ual report notification)	
For further information concerning this matter,	please call:	
Abid Chaudhry	305 233-3911 at ( )	
Name of Person	Area Code & Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following	amount:	
S25 Filing Fee	\$55 Filing Fee & Certified Copy	

2023 AHC 2.3 PM (2.1.

## 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	ame of the limited liability company:	se Training, LLO	.C
2. (a)	7365 SW 117th Avenue, Miami, FL 33183	(b)	7365 SW 117th Avenue, Miami, FL 33183
2. (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)
	8.05.2023		3000149952
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	David Nunez de Villavicencio	rate of the factor	
	Registered Agent and Registered Office shown on the records  David Nunez de Villavicencio	of the Florida De	ер. от заис.
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	
	7365 SW 117th Avenue	2 <u>8</u>	
	Miami	FL. 33183	2023 AUG
(b)	Abid Chaudhry		2023 AUG 23
,	Enter name of NEW Registered Agent and/or NEW Register	<u>ss</u> :	
	Abid Chaudhry		PM 12: 40
	NEW Registered Office Address:		
	7365 SW 117th Avenue	<del> </del>	
	Miami	FL_33183	
chang agent was/w the art	limited liability company is not organized under the e or changes are made, the Florida street address of a will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the street address.	the registered of liability composite of the limite he limited liab	office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in bility company.  Thaudhry
I here provis the ob to mer notifie	ature of a member or authorized representative of a member  eby accept the appointment as registered agent and a  sions of all statutes relative to the proper and comple  oligations of my position as registered agent as provi  rely reflect a change in the redistered office address,  all in writing of this change.	wree to act in ste performand ded for in Cha I hereby conf	Printed or typed name of signee  I this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been