L14000046652

(Re	questor's Name)	
(Add	dress)	
(Ad	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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D. SCOTT OCT 2 7 2016

COVER LETTER

TO: Registration Section

INHS18 (2/14)

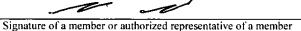
Division of Corporations			
PROFINALYSIS LLC SUBJECT:			
	e of Limited L	iability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Offi	ice Change and	fee(s) are submitted for filing.	
Please return all correspondence concerning thi	is matter to the	following:	
MARKKU KONTTINEN			
Name of Person			
PROFINALYSIS LLC			芸術で
Firm/Company		<u> </u>	8
5330 OAKMONT VILLAGE CIR			25 SEE
: Address			F.S.T.
LAKE WORTH, FL 33463		•	ST. U
City/State and Zip Code			
MKONTTINEN@AOL.COM			
E-mail address: (to be used for future ann	ual report noti	fication)	
For further information concerning this matter,	please call:		
Markku Konttinen	561	309-1520	
Name of Person	" (Area Code & Daytime Telep	hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P. Ta	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314	
Enclosed is a check for the following	amount:		
☑ \$25 Filing Fee	□ \$	55 Filing Fee & Certified Copy	,

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.

. (a)			b)		s of limited liability co	
	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y:			s of limited liability co BE POST OFFICE I	
	5330 OAKMONT VILLAGE CIR		5330		VILLAGE CIR	
	LAKE WORTH, FL 33463		LAKE	E WORTH, FI	_ 33463	
	03/19/2014		L1400	00045652		
	Date of filing/registration in Florida	4.		Document	number	
	Registered Agent and Registered Office shown on the record			`State:		
				State:		
	UNITED STATES CORPORATION AGE Registered Office Address (MUST BE FLORIDA STR	ENTS, INC).	State:		
	UNITED STATES CORPORATION AGE Registered Office Address (MUST BE FLORIDA STR 13302 WINDING OAK COURT A	ENTS, INC <i>EET ADDRES</i>	<u>s)</u>	State:	العمرة العمر	
	UNITED STATES CORPORATION AGE Registered Office Address (MUST BE FLORIDA STR	ENTS, INC <i>EET ADDRES</i>	<u>s)</u>	State:		
(b)	UNITED STATES CORPORATION AGE Registered Office Address (MUST BE FLORIDA STR 13302 WINDING OAK COURT A	ENTS, INC <i>EET ADDRES</i>	<u>s)</u>	State:		FI
(b)	UNITED STATES CORPORATION AGE Registered Office Address (MUST BE FLORIDA STR 13302 WINDING OAK COURT A	ENTS, INC <u>EET ADDRES</u> _, FL 33612	S. S	State:	OCT 25	TIPE
(b)	UNITED STATES CORPORATION AGE Registered Office Address (MUST BE FLORIDA STR 13302 WINDING OAK COURT A TAMPA	ENTS, INC <u>EET ADDRES</u> _, FL 33612	S. S	State:	OCT 25 TA	FILED
(b)	Registered Office Address (MUST BE FLORIDA STR 13302 WINDING OAK COURT A TAMPA Enter name of NEW Registered Agent and/or NEW Registered Agen	ENTS, INC <u>EET ADDRES</u> _, FL 33612	S. S	State:	OCT 25 M	FILED
(b)	UNITED STATES CORPORATION AGE Registered Office Address (MUST BE FLORIDA STR. 13302 WINDING OAK COURT A TAMPA Enter name of NEW Registered Agent and/or NEW Registered Agent	ENTS, INC <u>EET ADDRES</u> _, FL 33612	S. S	State:	CT 25 M	FILED

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered 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.



MARKKU KONTTINEN

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.

Signature of Registered Agent