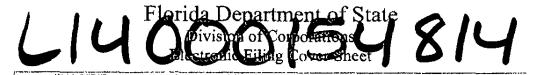
1/20/2016

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : BUSINESS FILINGS Account Number : 105256001620 Phone : (608)827-5300 Fax Number : (608)827-5501 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address:_ LLC REGISTERED AGENT CHANGE GENUSIS SOLUTIONS LLC Certificate of Status 0 Certified Copy 0 Page Count 02

Electronic Filing Menu Corporate Filing Menu

Estimated Charge

Help

\$25.00

H160000103373

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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.

l. Na	Name of the limited liability company: Genusis Solutions LLC				
2. (a)	Principal office address of limited liability company	4411 Sunbeam Rd #24623			
	(Note: MUST BE STREET ADDRESS)	Jacksonville, Florida 32241			
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	4411 Sunbeam Rd #24623 Jacksonville, Florida 32241			
10/3/20	14	L14000154814			
3. Da	te of filing/registration in Florida	4. Document number			
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	Registered Agent:	Dwayne Taylor	<u> </u>	,	
	Registered Office Address:	4411 Sunbeam Road, #24623			
	•	Jacksonville, Florida 32241			
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>				
	NEW Registered Agent:	Business Filings Incorporated			
	NEW Registered Office Address:	1200 South Pinc Island Road			
(MUST BE FLORIDA STREET ADDRESS)		Plantation	FL 33324		
confirmand the liability the method op-	imited liability company is not organized under the limed that after the change or changes are made, the Flee business office of the registered agent will be idently company, it is hereby confirmed that the change(s) embers of the limited hability company or as otherwise erating agreement of the limited liability company.	orida street address of the regi- ical. Or, in the case of a Florid was/were authorized by an aff	stered office la limited irmative vo	te of or 2018	
Dwayn	e Taylor, Member		2 2	AT EAST	
	or typed name of signce	-	2		
I here comple and I is Chapte addres Mall Signatus	by accept the appointment as registered agent and a vivili the provisions of all statutes relative to the provisions of all statutes relative to the provision familiar with and accept the obligations of my poor 605, F.S. Or, if this document is being filed to me. I hereby confirm that the limited liability company. Mark Williams, AVP Business Filings Incorporate of Registered Agent	gree to act in this capacity. I f oper and complete performance sition as registered agent as pr rely reflect a change in the reg i has been notified in writing o ated	hirthei' agre e of my duth wided for i istered offic f this chang		

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

ENHS18 (12-13)