189 9ZZ

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
	,	
(6)	. 10-1-7i- @i #	
(CI	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name)	
(Dr	ocument Number)	
(50	Jedinione Hamoery	
Certified Copies	Certificates of	Status
Special Instructions to Fili	na Officer:	

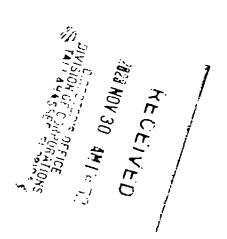
Office Use Only



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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	11/30/2023	
Name:	Juliana	
Reference #:	2111557	_
	BIOME CONSU	LTING GROUP, LLC
☐ Article	s of Incorporation/Authorization	to Transact Business
☐ Amend	dment	
✓ Chang	ge of Agent	
☐ Reinst	atement	
☐ Conve	ersion	
☐ Merge	r	
☐ Dissol	ution/Withdrawal	
Fictitio	ous Name	
Other_		
Authorized Ar	mount: \$25.00	
Signature:	Juliana Prestia	

F: 800.944.6607

V

F: +852.2682.9790

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.

L N	ame of the limited liability company:	BION	OME CONSULTING GROUP, LLC	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b	(b)	
	No Change		No Change	
	12/12/2014		L14000189922	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	ECO LOGIC CONSULTING GROUP	. INC		
3. (a)	Registered Agent and Registered Office shown on the records of		ida Dept. of State:	
	3821 Scenic Hwy			
	Registered Office Address (MUST BE FLORIDA STREET)	SS)		
				
	Pensacola I ⁻]	3	2023 130 32504 30	
	O Claballas		ယ · O	
(b)	Cogency Global Inc. Enter name of NEW Registered Agent and/or NEW Registered	L (Affice ad	address:	
	Table faith of May Registered Agent and of May Registered	r connec ad		
	115 North Calhoun Street, Suite	4	2: 0	
	NEW Registered Office Address:	<u>-'</u>	5	
	- U.			
		·3	32301	
the cha agent was/w	limited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lifere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	f the regis (ability co of the lim	gistered office and the business office of the register company, it is hereby confirmed that the change(s) imited liability company or as otherwise provided in	
	/s/ Benjamin Butterfield		Benjamin Butterfield	
Signa	nture of a member or authorized representative of a member		Printed or typed name of signee	
provis the ob to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect a change in the registered office address, I d'in writing of this change.	ree to act performed for in (hereby co	ect in this capacity. I further agree to comply with the mance of my duties, and I am familiar with and account of the following file of the following file confirm that the limited liability company has been	ic zpi zd
	/s/ Sean Honan			

Signature of Registered Agent