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(Requestor's Name) (Address)	200274603422
(Address) (City/State/Zip/Phone #)	07/09/1501007003 **25.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	
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COVER LETTER

Registration Section TO: **Division of Corporations**

4X0 Consulting LLC **SUBJECT:** ame of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alexander Runser Name of Person Luyo Consulting Firm/Company 433 Canbelly S+ Address O COQ FL 32927 City/State and Zip Code <u>Allxander(OL4X0Consulting, Con</u> E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Allx RUMSLY at (32), 574 1755 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

INHS18 (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.

(On \$4 XO Name of the limited liability company: 1 2. (a) (b)10 Principal office address of limited liability company: Mailing address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX) 32901 0889 3. Document number 5. (a) Registered Agent and Régistered Office shown on the records of the Florida Dept. of State: Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 5016 2004 (b)NEW Registered Office Address: anbelly oCog 3292 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. homas taxn'e Printed or typed name of signee Signature of a member of authorized representative of a member

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.

Ime Signature of Registered Argent

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