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(Re	equestor's Name).	
(Ac	idress)	
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(City/State/Zip/Phone #)		
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SECREDARY OF STATE

MAY 27 2016 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: MG Tactical So Name of Limited Lial	lutions, LLC	
Dear Sir or Madam:	•	
The enclosed Registered Agent/Registered Office Change and fe	ee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the fo	llowing:	
Pedro Marin	·	
Name of Person		
MG Tactical Solutions, LLC	_	
Firm/Company		
16323 SW 9th Way	_	
Address		
Miami, FL 33194	_	
City/State and Zip Code		
mn pedro @hotmail.com		
E-mail address: (to be used for future annual report notification)	ation)	
For further information concerning this matter, please call:		
Pedro Marin at 786) 715 48 89 Area Code & Daytime Telephone Number	
Name of Person	Area Code & Daytime Telephone Number	
Registration SectionRegistration SectionDivision of CorporationsDivision Of CorporationsClifton BuildingP.O.	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. Tactical Solutions, LLC 1. Name of the limited liability company: Miami, FL 38194 (b) 15323 Sw 9th Way Miami, FL 33194

Mailing address of limited liability company: Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX) June 9,2015 L 150001 00372 3. Document number Aaents, states corporation Enter name of NEW Registered Agent and/or NEW Registered Office address: 15323 NEW Registered Office Address: Miani

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.

of a member or authorized representative of a member

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 chapte in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Cheyenne Moseley, Asst. Secretary on behalf of United States Corporation Agents, Inc.

Signature of Registered Agent