

L15000136-160

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

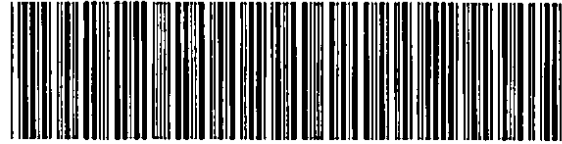
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100302286461

100302286461  
08/10/17--01006--027 \*\*25.00

FILED  
17 AUG 10 PM 2:45  
DIVISION OF COURT OFFICIALS

O. SIMMONS  
AUG 11 2017

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Background Analytics LLC  
Name 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:

Natasha Rabsatt  
Name of Person

Background Analytics LLC  
Firm/Company

14604 Bogan Castle Place  
Address

Wimauma, FL 33598  
City/State and Zip Code

backgroundanalytics@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Natasha Rabsatt at ( 813 ) 812 5534  
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

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.

1. Name of the limited liability company: Background Analytics LLC
2. (a) 14604 Brogan Castle Place (b) 14604 Brogan Castle Place  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)  
Wimauma FL 33598 Wimauma, FL 33598

3. 8/11/2015 4. L15000136968  
Date of filing/registration in Florida Document number

5. (a) United States Corporation Agents, Inc.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

13302 Winding Oak Court  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

A

Tampa, FL 33612

- (b) Natasha Rabsatt  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

14604 Brogan Castle Place  
NEW Registered Office Address:

Wimauma, FL 33598

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.

Natasha Rabsatt  
Signature of a member or authorized representative of a member

Natasha Rabsatt  
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.

Natasha Rabsatt  
Signature of Registered Agent

FILED  
17 AUG 10 PM 2:45  
DIVISION OF CORPORATIONS