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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 1, 2020

TIA E. JENSEN ALTERNATIVE LEGAL RESOLUTIONS, LLC 9040 TOWN CENTER PARKWAY LAKEWOOD RANCH, FL 34202

SUBJECT: ALTERNATIVE LEGAL RESOLUTIONS, LLC

Ref. Number: L15000171953

chew wood We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 520A00007138

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Alternative legal Name of Limited Liabi	Resolutions, LLC		
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	owing:		
Tia E. Jensen Name of Person			
Alternative Legal Resolutions, 1	LLC		
9040 Town Center Parkway			
Lakewood Ranch 1-L 34202 City/State and Zip Code	2		
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
	rea Code & Daytime Telephone Number		
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

Enclosed is a check for the following amount:

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.

1. Name of the limited liability company: Alternative Le	al Resolutions, LLC
2. (a) 9040 Town Center Pkuzy (b) 904	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Lake wood Bunch, Fr 34202 alec	wolkanch, FL34202
$\frac{10 - 6 - 2015}{\text{Date of filing/registration in Florida}}$	OUCITI 953 Document number
5. (a) True F. Jensen Registered Agent and Registered Office shown on the records of the Florida Dept. of State	:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	. 200
Sx. rusote, 1=6 34237 	2020 APR 16
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:	PH 2:
NEW Registered Office Address:	52
Lakeward Banch, FL 34202	
, FL	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
Signature of a member or authorized representative of a member	Tenses Printed or typed name of signee
I hereby accept the appointment as registered agent and agree to act in this capa provisions of all statutes relative to the proper and complete performance of my athe obligations of my position as registered agent as provided for in Chapter 605, to merely reflect a change in the registered office address. I hereby confirm that it notified in writing of this change. Signature of Registered Agent	city. I further garee to comply with the