## L160000 15 166

(Requestor's Name)				
(Ad	ldress)			
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R. WHITE JAN 1 6 2020

## **COVER LETTER**

TO:	Registration Section	
	Division of Corporations	

Name of Li	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
DENIZ KAYA	
Name of Person	
Firm/Company	<del></del>
12004 RACETRACK ROAD	
Address	
TAMPA, FL 33626	
City/State and Zip Code	
dkaya@perseusis.com	
E-mail address: (to be used for future annual repo	rt notification)
For further information concerning this matter, please c	all:
DENIZ KAYA at (	215-9576
Name of Person	Area Code & Daytime Telephone Numbe
Mailing Address: 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	:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
NHS18 (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.

l. N	ame of the limited liability company:  PERSEUS INFO	RMATION SECURT	IY CONSULTING LLC
2. (a)	12004 RACETRACK ROAD	(b) 12004 RA	ACETRACK ROAD
,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(7)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	TAMPA, FL 33626	TAMPA,	FL 33626
	01/21/2016	L16000015	166
}.	Date of filing/registration in Florida	4.	Document number
5. (a)	BRIAN J SANDERS (NOTE: THIS I	S THE 2nd CHANGE	<u>:</u>
· (a)	Registered Agent and Registered Office shown on the records of PRIOR AGENT WAS RAYM	•	
	Registered Office Address (MUST BE FLORIDA STREET) 16528 N DALE MABRY HWY	ADDRESS)	_
	TAMPA	33618	2019 DE
(b)	DENIZ KAYA  Enter name of NEW Registered Agent and/or NEW Registered	Office address:	- C17 PM - 133
	NEW Registered Office Address:		_ 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.
	12004 RACETRACK ROAD		-
	TAMPA FI	_33626	_
:hang igent vas/w	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited literer authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registered office ar ability company, it is of the limited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
Signa	ature of a member or authorized representative of a member	-	Printed or typed name of signee
provis he ob o mer	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I did no writing of this change.	performance of my	duties, and I am familiar with and accept
1/1	lan sandeis		

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