

L16 0000 96763

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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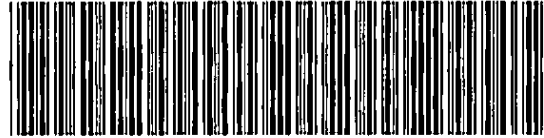
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

A. BUTLER

SEP 21 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Metanoia Consulting 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:

Dwayne Harmon
Name of Person

Metanoia Consulting LLC
Firm/Company

12686 Kernan Forest Blvd.
Address

Jacksonville, FL 32225
City/State and Zip Code

dwayne@harmon1517@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dwayne R. Harmon 904 226-6651
Name of Person at () Area Code & Daytime Telephone Number

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

**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: <u>Metanoia Consulting LLC</u>	
2. (a) <u>12686 Kernan Forest Blvd.</u> Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i> <u>Jacksonville, FL 32225</u>	(b) <u>12686 Kernan Forest Blvd.</u> Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i> <u>Jacksonville, FL 32225</u>
3. <u>5/17/2016</u> Date of filing/registration in Florida	4. <u>L16000096763</u> Document number
5. (a) <u>The Liles Firm, P.A.</u> Registered Agent and Registered Office shown on the records of the Florida Dept. of State <u>301 West Bay St</u> Registered Office Address <i>(MUST BE FLORIDA STREET ADDRESS)</i> <u>The Liles Firm P.A. Ste 1030</u> <u>Jacksonville</u> , FL <u>32202</u>	
(b) <u>P. Campbell Ford, Esq.</u> Enter name of NEW Registered Agent and/or NEW Registered Office address : <u>Ford Miller & Wainer PA</u> NEW Registered Office Address : <u>1835 3rd St N</u> <u>Jacksonville Beach</u> , FL <u>32250</u>	

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TALLAHASSEE, FL

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.

x Dwayne R. Harmon
Signature of a member or authorized representative of a member

Dwayne R. Harmon
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.

[Signature]
Signature of Registered Agent