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COVER LETTER

TO: Registration Section Division of Corporations	
Paralegal Consultants, LLC SUBJECT:	
	ited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Valerie Nowottnick	
Name of Person	
Paralegal Consultants, LLC	
Firm/Company	
2080 24th Avenue NE	
Address	
Naples, FL 34120	
City/State and Zip Code	
valerie@paralegalconsult.com	
E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please ca	all:
Valerie Nowottnick 24 at (0 223-7293
Name of Person	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. N	ame of the limited liability company: Paralegal Consulta	nts, LL						
2. (a)	2080 24th Avenue NE	(2080 b)	24th /	Avenue NE			
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- `	~/		ailing address of (Note: MAY BI			-
	Naples, FL 34120	_	Naple	es, FL	34120			
	June 14, 2017	_	L17000	012986	51			_
3.	Date of filing/registration in Florida	4.		I.	Document nun	nber		
5. (a)	Valerie M. Nowottnick							
(,	Registered Agent and Registered Office shown on the records of the 2094 Satsuma Lane	ne Floric	la Dept. o	f State:		SEC	2022 AUG	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					LLAHASSER	AUG -8	
	Naples, FL_	34120				ASSEI V	PH	
(b)	Valerie M. Nowottnick						1:09	
	Enter name of NEW Registered Agent and/or NEW Registered O	Office a	ddress:			•		
	2080 24th Avenue NE							
	NEW Registered Office Address:		•					
	Naples, FL_	34120						
change agent v was/w	imited liability company is not organized under the law or changes are made, the Florida street address of the rwill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of icles of organization or the operating agreement of the liability of the liability of the liability and the liability of the liabilit	egister oility c the lir imited	ed offic ompany nited lia	e and , it is lability comp	the business of hereby confire company or a pany.	office of the med that the	e regist e chan	ered ge(s)
Signa	dure of a member or authorized representative of a member	va	erie wi.		Printed or typed i	name of sion		
I here provisi the obj to mer notifie	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided by reflect a change in the registered office address. I his lyin writing of this change	e to ac perform for in excepy c	t in this vance of Chapter onfirm i	canac	rity. I further	agree to c	omnlv v	with the d accept ng filed been