L17000 213286

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2018 NOV 13 PH 4: 20
SECRETARY OF STATE
TALLAHASSEE, FLORID

NOV 30 2018 C MCNAIR

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: StormJob.com LLC		\$ 5 E		
	ne of Limite	d Liability Company		
Dear Sir or Madam:		A. 25. 25. 25. 25. 25. 25. 25. 25. 25. 25		
The enclosed Registered Agent/Registered Off	ice Change	and fee(s) are submitted for filing.		
Please return all correspondence concerning th	is matter to	the following:		
Corey Thomas				
Name of Person				
StormJob.com LLC				
Firm/Company				
2301 Wonderview Road				
Address				
Timonium, MD 21093				
City/State and Zip Code				
corey@stormjob.com				
E-mail address: (to be used for future ann	ual report i	otification)		
For further information concerning this matter,	please call	:		
Corey Thomas	at (407	, 415-7602		
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		
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. Na	ime of the limited liability company: StormJo	b.cor	n LLC			
2. (a)	StormJob.com, LLC	/1	(b) StormJob.com, LLC			
4. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(,	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	2301 Wonderview Road		2301 W	onderview Road		
	Timonium, MD 21093		Timoniu	m, MD 21093		
	10/16/2017		L170002	213286		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	KELLEY, RYAN					
J. (a)	Registered Agent and Registered Office shown on the records of 3104 HARRISON AVENUE	of the Florid	a Dept. of State	- 3:		
	Registered Office Address (MUST BE FLORIDA STREE	%				
	24			SEC .		
	ORLANDO	_{FL} 3280	4	空气		
(b) ه	Registered Agents Inc.		2018 NOV 13 PM 4: 20 2018 NOV 13 PM 4: 20 TALLAHASSEE FLORIO			
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			FLOOP H.		
3030 N. Rocky Point Dr.				20 20 20		
	NEW Registered Office Address:		•			
	STE 150A		<u>.</u>			
	Tampa	_{"L} 3360	7			
the cha agent v was/we	imited liability company is not organized under the large or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the regi liability e s of the lin he limited	istered office ompany, it is nited liabilit	and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in apany.		
Signat	ture a member or authorized representative of a member	 -	··- <u>-</u>	Printed or typed name of signee		
provisi the obl to merc	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple- igations of my position as registered agent as provicely reflect a change in the registered office address, lin writing of this change.	te pertorm	iance of my i	duties, and Lam familiar with and accent		

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

Assistant Secretary

Bill Havre

Signature of Registered Agent