

| (Requestor's Name) | | | |
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| (City/State/Zip/Phone #) | | | |
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| PICK-UP WAIT MAIL | | | |
| | | | |
| (Business Entity Name) | | | |
| | | | |
| (Document Number) | | | |
| | | | |
| Certified Copies Certificates of Status | | | |
| - ·· | | | |
| Constitution A. Effective | | | |
| Special Instructions to Filing Officer: | | | |
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COVER LETTER

| Division | Division of Corporations | | | |
|--|--|---|--|--|
| SUBJECT: C. | CARRION GLOBAL CONSULTANCY, LLC | | | |
| | Name of Limit | ed Liability Company | | |
| Dear Sir or Mac | dam: | | | |
| The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. | | | | |
| Please return all correspondence concerning this matter to the following: | | | | |
| RAMON CAF | RRION | | | |
| | Name of Person | | | |
| CARRION GLOBAL CONSULTANCY, LLC | | | | |
| | Firm/Company | | | |
| 5536 GREYSTON STREET Address | | | | |
| Por HARBOR FL 34685 City/State and Zip Code | | | | |
| RAMON (ARRION 05 & GMAIL - COM E-mail address: (to be used for future annual report notification) | | | | |
| For further information concerning this matter, please call: | | | | |
| RAMON GRRION at (727) 799-9855 Name of Person Area Code & Daytime Telephone Number | | | | |
| Registra Division Clifton 2661 Ex | etr/Courier Address: ation Section n of Corporations Building xecutive Center Circle ssee, Florida 32301 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 | | |
| Enclose | Enclosed is a check for the following amount: | | | |
| 2 \$25 | Filing Fee [| ☐ \$55 Filing Fee & Certified Copy | | |

TO:

Registration Section

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 | Name of the limited liability company: CARRION GLOBAL CONSULTANCY, LLC | | |
|---------------------------|--|--|--|
| 2. (a) | 5536 GREYSTON STAPERTO | | |
| . () | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | |
| | PALM HARBOR, FL 34685 | | |
| 2 | JANUARU 16 2018 L18 Date of filing/registration in Florida 4. | 000014407 | |
| 3. | | Document number | |
| 5. (a) | | <u> </u> | |
| | Registered Agent and Registered Office shown on the records of the Florida Dept. of St | ate: | |
| | 28/63 U.S HUY 19N, | _ | |
| | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | 75. 18 | |
| | <u></u> | 二 | |
| | (LEARWATER ,FL 33761 | | |
| | (104/KU7/12K ,FL 33/16) | | |
| (b) | | | |
| (0) | Enter name of NEW Registered Agent and/of NEW Registered Office address: | 7: 1E ORIOA | |
| | 5536 GROUSTON STREOT NEW Registered Office Address: | _ | |
| | PALM HARBOR, EL 34685 | _ | |
| | , FL | | |
| the ch agent was/w | limited liability company is not organized under the laws of the State of lange or changes are made, the Florida street address of the registered off will be identical. Or, in the case of a Florida limited liability company, i were authorized by an affirmative vote of the members of the limited liabilities of organization or the operating agreement of the limited liability of | ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in | |
| / | RA | MON GARION Printed or typed name of signee | |
| Sign | ature of a member or authorized representative of a member | Printed or typed name of signee | |
| provis the ob to me | eby accept the appointment as registered agent and agree to act in this consistence of all statutes relative to the proper and complete performance of mobilizations of my position as registered agent as provided for in Chapter 6 rely reflect a change in the registered office address, I hereby confirm the definition of this change. | npacity. I further agree to comply with the v duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been | |

Signature of Registered Agent