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Name:	Larsen Slaten, PLLC	
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Thank you!

. 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	ame of the limited liability company: Larsen Slaten,	PLLC	_			
2. (a)			b)			
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 4700 Millenia Blvd. Suite 500 Orlando, Florida 32839			
	4700 Millenia Blvd. Suite 500					
	Orlando, Florida 32839					
	January 26, 2018		L180000245	507		
3.	Date of filing/registration in Florida	4.	_	Document number		
5. (a)	Richard E. Larsen					
5. (a)	Registered Agent and Registered Office shown on the records of	- ::				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			-		
	4700 Millenia Blvd. Suite 500					
	OrlandoFi	L_32839		-		
	C T Corporation System					
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			-		
					· ···	
	NEW Registered Office Address:	-	• •			
	1200 South Pine Island Road			_		
	Plantation	33324 L				
the cha agent v was/we	imited liability company is not organized under the la inge or changes are made, the Florida street address o will be Bentical. Or, in the case of a Florida limited I ero authorized by all affirmative vote of the members relea of organization or the operating agreement of the	iws of the of the reg iability c of the lir e limited	istered office ompany, it is nited liability	e and the business of s hereby confirmed y company or as oth pany.	office of the registered that the change(s)	
Sign	Signature of a hemper of authorized representative of a member			Printed or typed name of signee		
provisi the obl to mer notified	hy accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I d in writing of this change. C T Corporation System Theresa Buck, Assiste	e perforn ed for in hereby c	tance of my of Chapter 605 confirm that i	duties, and I am far 5. F.S. Or. if this de	niliar with and accept ocument is being filed	
3y: Signatu	re of Registered Agent Mule		•			

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