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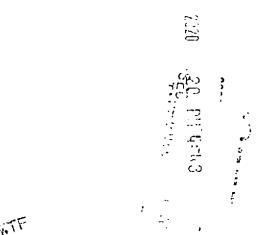
(Requestor's Name)						
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PICK-UP	WAIT	MAIL				
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(Document Number)						
Certified Copies	Certificates	s of Status				
Special Instructions to Filing Officer:						

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 30, 2020

MARC BELL 6800 BROKEN SOUND PKWY NW STE 200 BOCA RATON, FL 33487

SUBJECT: THE COLLEGE WATCH COMPANY, LLC

Ref. Number: L18000030757

We have received your document for THE COLLEGE WATCH COMPANY, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a PROFIT CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Wood Regulatory Specialist II

Letter Number: 520A00006934

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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: The College Watch Company 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:				
Marc Bell Name of Person				
The College Watch Company LLC Firm/Company				
6800 Broken Sound PKWY NW Ste 200 Address				
Boca Raton FL 33487 City/State and Zip Code				
mbell @marcbell.com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Marc Bell at (561) 988-1701 Name of Person Area Code & Daytime Telephone Number				
Mailing Address: Street Address:				
Registration Section Registration Section Division of Corporations Division of Corporations				
Division of Corporations P.O. Box 6327 Division of Corporations The Centre of Tallahassee				
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810				
Tallahassee, FL 32303				
Enclosed is a check for the following amount:				
☐ \$25 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	une of the limited liability company: <u>The Colleg</u>	ge 1	Natch	Compa	ny We	<u>.</u>
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	•) <u>6800</u>	Bruken Tailing address o		ewy Nu
		Suite 200	_	Suite	200		
		Boca Raton, FL 33487	-	Buca	Raton	FC 33	487
3.		2/2/2018 Date of filing/registration in Florida	4.		000301 Document nu		
5.	(a)	To-Jean Figueira, ESQ. Registered Agent and Registered Office shown on the records of the	e Florida	Dept. of State	:		
		Registered Office Address (MUST BE FLORIDA STREET AL	ODRESS	7		7670	
		Suite 200				12	
		Boca Raton .FL	334	87			
	(b)	Enter name of NEW Registered Agent and/or NEW Registered O	Office ad	dress:		4: 4: 2: 2:	
		6800 Broken Sound PKWY N NEW Registered Office Address:	W				
		Suite 200					
		Boca Raton FL	<u> 334</u>	87			

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.

	• • •
	Marc Bell Managel
	11010
Signature of a member or authorized representative of a member	Printed or typed name(b) 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 of Registered Agent