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COVER LETTER

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 ΓO: Registration Section Division of Corporations 				
T & L Consulting Services Lisubject:	LC			
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this	s matter to the following:			
Thomas Patitucci				
Name of Person				
T+ L Consulting	Serves			
12025 68th Way				
Address				
Largo, FL 33773				
City/State and Zip Code				
apatitucci@hotmail.com				
E-mail address: (to be used for future annual	ual report notification)			
or further information concerning this matter,	please call:			
nomas Patitucci	908 577-2181			
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			

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.

. (a)	12025 68 th Way, Largo, FL 33773	(b) Sa	me as Office
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	3/1/18		000054588
	Date of filing/registration in Florida Chausana Magalay LIS Corp. Agents	4.	Document number
(a)	Cheyenne Moseley, US Corp. Agents Registered Agent and Registered Office shown on the records o	Cake Disable Dans	
	13302 Winding Oak Court A	и те гтогоа верт.	of State:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	Tampa, FL	33612	~~~
(b)	Thomas Patitucci		SECRETAS TAILLAHASS
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office address:	B TO
	12025 68th Way		SECOND PROPERTY OF THE PROPERT
	NEW Registered Office Address:		2: 26 STATE CORTE
	Largo	L 33773	
ie cha gent w as/we	mited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited lare authorized by an affirmative vote of the members cles of organization or the operating agreement of the	aws of the State of the registered liability compar of the limited 1 e limited liabili	of Florida, it is hereby confirmed that after loffice and the business office of the registered by, it is hereby confirmed that the change(s) lability company or as otherwise provided in ty company.
Signat	ure of a member or authorized representative of a member		Printed or typed name of signee
herel ovisi e obli	by accept the appointment as registered agent and as ons of all statutes relative to the proper and complet igations of my position as registered agent as provid by reflect a change in the registered office address, i	gree to act in the e performance of led for in Chapt	is capacity. I further agree to comply with th of my duties, and I am familiar with and acce er 605, F.S. Or, if this document is being file