L18000134098

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COVER LETTER

	gistration Section vision of Corporations		
SUBJECT	DB Consulting Firm, LLC		
		ame of Limited Lia	bility Company
Dear Sir o	Madam:		
The enclos	ed Registered Agent/Registered O	ffice Change and fe	ee(s) are submitted for filing.
Piease retu	rn all correspondence concerning	this matter to the fo	llowing:
Danielle Be	rman		
	Name of Person		_
DB Consult	ing Firm, LLC		
	Firm/Company		
133 NE 2nd	I Ave, Apt 2219		
	Address		
Miami, FL	33132		
	City/State and Zip Code		_
danielle@ta	cklewhatsnext.com		
E-ma	il address: (to be used for future a	nnual report notific	ation)
For further	information concerning this matte	er, please call:	
Danielle Be	rman	443 at (8414667
	Name of Person		Area Code & Daytime Telephone Number
M	ailing Address:		Street Address:
Re	gistration Section		Registration Section
Di	vision of Corporations		Division of Corporations
P.0	O. Box 6327		The Centre of Tallahassee
Ta	llahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
En	closed is a check for the following	ng amount:	
=	\$25 Filing Fee	Q \$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)	133 NE 2nd Avenue		(b) 133 NE 2nd Avenue				
(. ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- `		=	of limited liability co BE POST OFFICE		
	Apt 2219	_	Apt 2219				
	Miami, FL 33132	_	Miami, FL	. 33132			
	5/30/2018		L18000134	098			
(a)	Date of filing/registration in Florida Veronica Soto	4.		Document nu	ımber		
(4)	Registered Agent and Registered Office shown on the records of the 151 N Nob Hill Rd	e Florid	a Dept. of Stat	te:			
	Registered Office Address (MUST BE FLORIDA STREET AL Suite 303	DDRES	<u>รั</u> ว	_	2021 APR 23	 	
	Plantation FL 3	3324			R 23	** * * * * * * * *	
(b) .	Tanner Lakey Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u> 133 NE 2nd Avenue	Office ac	ddress:	_	AH 2: 44 SEATE SEATE	TT TT	
	NEW Registered Office Address:		·	_			
	Apt 2219			_			
	Miami , FL ³	3132		_			
ange ent w s/we artic	mited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited a member or authorized representative of a member	egister ility co the lin mited	ed office an ompany, it is nited liabilit	d the business s hereby confi y company or npany.	office of the reg	istered ange(s)	
ovisio obli mere tified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe igations of my position as registered agent as provided j by reflect a change in the registered office address, I he in writing of this change. s/: Janner Davis Lakey. Esa.	to ac. erform for in (reby c	t in this capt ance of my c Chapter 605 onfirm that	acity. I furthe duties, and I a 5, F.S. Or, if th the limited lia	r agree to compl m familiar with i his document is h hility company h	y with the and accep being filed as been	

Signature of Registered Agent