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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 : (855)330-1010 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:	
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## LLC REGISTERED AGENT CHANGE ATTENTION, INTELLECTUAL & LEARNING EVALUATIONS, LLC

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## 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)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b) 		failing address of limit (Note: MAY BE POS		
	06/26/18	 <u></u> <u>!</u>		0156106		****
i.	Date of filing/registration in Florida	4.		Document number	ſ	
. (4)	UNITED STATES CORPORATION A	S, INC.				
	Registered Agent and Registered Office shown on the records of	Dept. of State	:			
	5575 S. SEMORAN BLVD					
	Registered Office Address (MUST BE FLORIDA STREET					
	SUITE 36					
	ORLANDO, FI			2022 JUN		
(b)	Registered Agents Inc.				N N	,
(47).	Enter name of NEW Registered Agent and/or NEW Registered	l <u>ress</u> :		. 6		
	7901 4th St N			AH 8:		
	NEW Registered Office Address:			ယ္		
	STE 300				ω	
	St. Petersburg	33702				
he cha gent v vas/w	imited liability company is not organized under the la inge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited l ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the regis lability co of the lim	tered office mpany, it is ited liability	and the business of thereby confirmed y company or as of	office of the r I that the chan	egistere ige(s)
>	il a tack		ey Park			
Signa	ture of a member or authorized representative of a member			Printed or typed name	e of 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.

Bill Havre - Assistant Secretary

Signature of Registered Agent