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Division of Corporations
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From:

Account Name: REGISTERED AGENTS INC.

Account Number: \$20090000081 Phone: (307)200-2803 Fax Number: (855)330-1010

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S TALLEN

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Email Address:

LLC REGISTERED AGENT CHANGE B6 CONSULTING & ASSET MANAGEMENT LLC

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RLA-CH

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.	Name of the limited liability company: B6 C	Consulting	& Asset Managem	ent LLC	<u> </u>
2. (:	a) 32556 SUNNY PARKE DR.	(b)	32556 SUNNY PARKE	DR.	
(-	Principal office address of limited liability com (Note: MUST BE STREET ADDRESS)	pany:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	FERNANDINA BEACH, FL 32034		FERNANDINA BEACH,	FL 32034	
	08/01/18		18000184149		
3.	Date of filing/registration in Florida	4.	Document number		
5. ((a) UNITED STATES CORPORATION A	GENTS, INC.			
J. (Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	5575 S. SEMORAN BLVD				
	Registered Office Address (MUST BE FLORIDA S				
	SUITE 36			2021	
	ORLANDO	_{. FL} 32822		702N JUL 28	
(Northwest Registered Ag	ent LLC			
(Enter name of NEW Registered Agent and/or NEW Registered Office		ress:	PH	
	7901 4th St N			بب <u>ب</u>	
	NEW Registered Office Address:				
	STE 300		<u> </u>		
	St. Petersburg	_{. FL} 33702	<u>.</u>		
the ager	the limited liability company is not organized under change or changes are made, the Florida street ac int will be identical. Or, in the case of a Florida li s/were authorized by an affirmative vote of the ma articles of organization or the operating agreeme	ddress of the regis imited liability co lembers of the limi	tered office and the business offic impany, it is hereby confirmed tha ted liability company or as othery	e of the registi t the change(s)	ered)

Signature of a member or authorized representative of a member

Morgan Noble

Printed or typed name 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.

Company Glover - Assistant Secretary

Signature of Registered Agent