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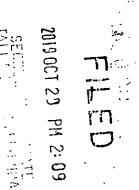
	(Requestor's Name)								
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(Business Entity Name)									
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Certified Copies	Certificates of Status								
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Y SULVEY

COVER LETTER

TO: Registration Section Division of Corporations								
SUBJECT: Lead Management 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:								
ROBERT BEYER								
Name of Person								
A-P-T SUITES Firm/Company								
Firm/Company								
8230 210th St. SOUTH STE 2								
Address								
BOCA RATON FL 33433								
City/State and Zip Code								
rb@aptsuites.com								
E-mail address: (to be used for future annual report notification)								
For further information concerning this matter, please call:								
ROBERT BEYER at (561) 409-5120								
Name of Person Area Code & Daytime Telephone Number								
STREET/COURIER ADDRESS: MAILING ADDRESS:								
Registration Section Registration Section								
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327								
2661 Executive Center Circle Tallahassee, Florida 32314								
Taffahassee, Florida 32301								
Enclosed is a check for the following amount:								
\$25 Filing Fee \$\Pi\$ \$55 Filing Fee & Certified Copy								

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

1

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:	LEAD MAN	AGEI	MENT	LLC			
2. (a)	·				failing address of lim			
Prin	cipal office address of limited liabil (Note: MUST BE STREET ADD			٨	dailing address of lim (Note: MAY BE P			
<u>895</u>	10 210th ST. SOUTH	STE. 2	_		210th ST.			
<u></u>	4 RATON FL 334	33	_	BOC.A	RATON F	L 3	343	3
	10/25/2018		_	L18	30002514	35		
3. D	Date of filing/registration in F	lorida	4.		Document number	er		
INCO Registered 1788 LOX/ (b) Enter name ROB NEW Regi 823	Agent and Registered Office shown ORP SERVICES IN Office Address INSTREFT.0 OFFICE ADDRESS IN COURT NO AHATCHEE OFFICE ADDRESS OFFICE ADDRES	C. RIDA STREET AD RTH FL. NEW Registered Of	DRESS) 334	7 <i>O</i>		SECRETAIN IN LIVIE TALLY WOSEELELONIDA	2019 OCT 29 PH 2: 09	TILED
If the limited liab the change or cha agent will be ider was/were authorithe articles of org	ility company is not organize nges are made, the Florida statical. Or, in the case of a Florida statical. Or, in the case of a Florida statical or the operating agree of authorized representation of the appointment as registered as a change in the registered of this change.	d under the laws reet address of the orida limited liabilithe members of the line a member	of the S ne registe ility com the limite mited lia	tate of Floered office ipany, it is ed liability bility com	and the business thereby confirme y company or as on a company. The BEYER Printed or typed nare or typed for the confirmed or ty	s office of that the otherwise ne of sign	of the rene chan e provi	egistered ge(s) ded in