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COVER LETTER

TO:	Registration Section Division of Corporations								
SURI	JECT: NADA PROBLEM SOLUTIONS LLC Name of Limited Liability Company								
SUDJ									
Dear S	ir or Madam:								
The er	closed Registered Agent/Registered Offi	ce Change and	l fee(s) are submitted for filing.						
Please	return all correspondence concerning this	s matter to the	following:						
DOM	INIC G DESOTO								
	Name of Person								
NAD	A PROBLEM SOLUTIONS LLC								
	Firm/Company		_						
2114	GREY MOUNT DR								
	Address		_						
VALF	RICO FL 33594								
	City/State and Zip Code								
INFO	@ROMANTAXPA.COM								
E	E-mail address: (to be used for future ann	ual report noti	fication)						
For fu	rther information concerning this matter,	please call:							
DOM	INIC G DESOTO	313 at (802-6149						
	Name of Person		Area Code & Daytime Telephone Number						
Name of Person 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	□ s	55 Filing Fee & Certified Copy						
INHS1	8 (2/14)								

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

l. Na	ime of the limited liability company:	NADA PROBLEM SOLUTIONS LLC						
2. (a)	5603 LITHIA PINECREST RD		(b) 5603 LITHIA PINECREST RD					
. (.,)	Principal office address of limited lia (Note: MUST BE STREET A		_ (*)		Mailing address o (Note: MAY B		-	
	LITHIA, FL 33547		-	LITHIA,	FL 33547			
	01/24/2019		L	.190000:	25706			
5. (a)	Date of filing/registration in DOMINIC G DESOTO	Florida	4.		Document nu	mber		
(b) .	Registered Agent and Registered Office show 5603 LITHIA PINECREST RD Registered Office Address (MUST BE F)	- e: -						
	LITHIA	, FL	3547		-	77.69 77.5	2019 AUG	and we
	Enter name of NEW Registered Agent and/o	or <u>NEW Registered O</u>	ffice add	ess:	-	:	U6 26 AM	
	NEW Registered Office Address: 2114 GREY MOUNT DR				-	<u>.</u> .	0, 5, 1	U
	VALRICO	, FL 3:	3594					
he char gent w vas/we he artic	mited liability company is not organize or changes are made, the Florida will be identical. Or, in the case of a Free authorized by an affirmative vote coles of organization or the operating a	street address of the lorida limited liab. of the members of the lingreement of the lingr	e regist ility con the limit nited lia	ered office pany, it is ed liabilit bility con	e and the busin s hereby confir y company or a npany. DESOTO	ess office med that t as otherwi	of the the cha se prov	registered nge(s)
	ure of a member or authorized representative of				Printed or typed	-		
rovisio ie obli i mere	y accept the appointment as registere ons of all statutes relative to the proper gations of my position as registered a ly reflect a change in the registered of in writing of this change.	ed agent and agree er and complete pe egent as provided f effice address, I her	to act i erforman or in Cl reby cor	n this cap ace of my apter 605 firm that	acity. I further duties, and I ar i, F.S. Or, if th the limited liah	agree to n familiar is docume pility comp	comply with a rnt is be cany he	with the and accep- eing filed as been

Signature of Registered Agent