# L19000041280

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## CORPORATE ACCESS,

#### When you need ACCESS to the world

INC.

236 Fast 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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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.

1. Na	ame of the limited liability company:	C							
2. (a)	3225 S Macdill Ave Ste 129-151			(b) 3225 S Macdill Ave Ste 129-151					
2. (11)	Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)					
	Tampa, FL 33629			Tampa. FL	_ 33629				
	<del></del>			_					
	02/15/2019		[.	.190000462	280				
3.	Date of filing/registration in Florida	4.			Document number				
5. (a)	Law Office of Frank Lago, P.A.								
J. (u)	Registered Agent and Registered Office shown on the records of 3152 Little Road #191	<del>_</del> te:							
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				_	52/12	SIAIC		
	TRINITY, FI	L	5		_	007 -	크림 크림		
(b) .	Telos Legal Corp.		20						
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				_	=	· · · · ·		
	155 Office Plaza Dr.					WHITE ST			
	NEW Registered Office Address:	_		^ <7					
	Tallahassee	3230	1		_				
	, FI	L			_				
change agent v was/w	imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the MANN WELLER	e registiability of the limite	terec con limited lia	l office an ipany, it is ed liabilit	d the business office of shereby confirmed the sycompany or as othe open.	of the regis	itered ige(s)		
Signa	Signature of a member or authorized representative of a member			Printed or typed name of signee					
I here provisi the obi to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to perford for i hereby	act i rmai in Ci v coi	n this cape ace of my e apter 605 afirm that	acity. I further agree duties, and I am loss 5, F.S. Or, if this doct the limited liability co	to comply liar with ar iment is be ompany ha	with the id accept ing filed s been		
Signatu	ire of Registered Agent	,							