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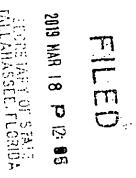
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COVER LETTER

TO: Registration Section **Division of Corporations** Adapt Marketing & Development LLC SUBJECT: 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: Shannon Fuller Name of Person Adapt Marketing & Development LLC Firm/Company 3132 Guava Street Address Fort Myers, FI 33916 City/State and Zip Code adaptconsultdevelop@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Shannon Fuller Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: **☑** \$25 Filing Fee □ \$55 Filing Fee & Certified Copy

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)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	02/25/2019	L190	000054316
	Date of filing/registration in Florida	4.	Document number
(a)	Rachel Crews		
Δ,	Registered Agent and Registered Office shown on the records 8500 Redwood Drive	of the Florida Dept.	
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	ZIII HAR
	Saint James City	FL 33956	
(b)	Jessica Daniels		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		
	3132 Guava Street ,		
	NEW Registered Office Address:		·
	Fort Myers	FL ³³⁹¹⁶	
cha nt v /wo arti	imited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the street authorized by the operating agreement of the opera	s of the registered I liability compares of the limited l	d office and the business office of the regist ny, it is hereby confirmed that the change(s liability company or as otherwise provided ity company. on Fuller
,,,	ture of a member or authorized representative of a member by accept the appointment as registered agent and completions of all statutes relative to the proper and completing the registered agent as proving the registered office address.	agree to act in the ele performance ided for in Chap . I hereby confir	Printed or typed name of signee his capacity. I further agree to comply with of my duties, and I am familiar with and ac ter 605, F.S. Or, if this document is being f m that the limited liability company has bee

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00