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To:	
Division of Corporations	
Fax Number : (850)617-6383	
From:	()
Account Name : REGISTERED AGENTS INC.	
Account Number : 120090000081	<u>-> </u>
Phone : (307)200-2803	•
Fax Number : (855)330-1010	•
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.	· · · · · · · · · · · · · · · · · · ·
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LLC REGISTERED AGENT CHANGE MICHAEL SCOTT CONSULTING LLC

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MAR 25 2020

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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.

. Na	me of the limited liability company:	nael Scott	Consu	ilting LLC	<u></u>				
2. (a)	1800 ALTA VISTA ST.	(h	(b) 1800 ALTA VISTA ST.						
(el) _.	Principal office address of limited liability com (Note: MUST BE STREET ADDRESS)	npany:	Mailing address of limited li (<u>Note: MAY BE POST</u> (liability company:		
	SARASOTA, FL 34236		SARASO	OTA. FL 3423	6				
	03/21/2019		L190000	079170					
١.	Date of filing/registration in Florida	4.		Document num	ber				
	UNITED STATES CORPORATION A	AGENTS, INC.							
5. (a)	Registered Agent and Registered Office shown on the		Dept. of State	- e:					
	5575 S. SEMORAN BLVD								
	Registered Office Address (MUST BE FLORIDA	STREET ADDRESS	<u> </u>	•					
	SUITE 36								
		2222)	_	ار س	2020			
	Orlando	FL 32822		_	200	II.			
	Registered Agents Inc.					2020 MAR 24			
(b)	Enter name of NEW Registered Agent and/or NEW I	Registered Office add	dress:	_					
						AM 10: 01	F==0		
	7901 4th St N				:_	0.	- Ami		
	NEW Registered Office Address:				; ;;	=			
	STE 300		<u>. </u>	_					
	St. Petersburg	. FL_33702	<u>></u>						
				_					
the cha agent v was/wa	imited liability company is not organized und inge or changes are made, the Florida street a will be identical. Or, in the case of a Florida le ere authorized by an affirmative vote of the manufactors of organization or the operating agreement	ddress of the regis limited liability or nembers of the lim ent of the limited l	stered office ompany, it is inted liability diability cor	e and the busine is hereby confirm by company or as	ess office of med that the	change	usterea 2(s)		
<u> </u>	ilen Tark		ey Park	Printed or typed r	name of signer				
I here provisi the obl to mer notified	by accept the appointment as registered agen ons of all statutes relative to the proper and a igations of my position as registered agent as ely reflect a change in the registered office and it writing of this change. Bill Havre - A	nt and agree to act complete perform s provided for in t	ance of my Chapter 603 onfirm that	pacity. I further duties, and I an 5. F.S. Or. if thi	agree to co 1 familiar w 1s document	mply wi ith and is bein	accepa g filed		