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(Requestor's Name)									
(Address)									
(Address)									
(City/State/Zip/Phone #)									
PICK-UP WAIT MAIL									
(Business Entity Name)									
(Decree New York)									
(Document Number)									
Certified Copies Certificates of Status									
Special Instructions to Filing Officer:									

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U3/U2/20 U1016 U25 #*50.00

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COVER LETTER

	Registration Section Division of Corporations							
SUBJE	Hottinger Consulting LLC							
	Name of Limited Liability Company							
Dear Si	r or Madam:							
The enc	closed Registered Agent/Registered Office Ch	nange and fee(s) are submitted for filing.						
Please r	cturn all correspondence concerning this mat	ter to the following:						
Daniel C	Craig-Haltam							
	Name of Person							
Hottinge	er Consulting LLC							
	Firm/Company							
601 Heri	itage Drive #465							
	Address							
Jupiter								
	City/State and Zip Code							
Florida, i	33458							
E-1	mail address: (to be used for future annual re	port notification)						
For furth	ner information concerning this matter, please	e call:						
Daniel Ci	raig-Hallam	772 2998626						
	Name of Person	Area Code & Daytime Telephone Number						
]] }	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303						
]	Enclosed is a check for the following amou	nt:						
6	■ \$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.

1. N	ame of the limited liability company: Hottinger Consulting	ng LL	C			
2. (a)	516 Malcolm Chandler Lane #106,		(b)	516 Malco	lm Chandler Lane #	1106
(.,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)		Mailing address of lim (Note: MAY BE PO	ited liability company: OST OFFICE BOX)
	West Palm Beach, FL, 33401	_		West Palm	Beach, FL, 33401	
	02/21/2020		I	.1900008624	47	
3.	Date of filing/registration in Florida	4.			Document number	F
5. (a)	Daniel Craig-Hallam					
,	Registered Agent and Registered Office shown on the records of th	ne Flori	ida l	Dept. of State	- : :	
	516 Malcolm Chandler Lane				-	
	Registered Office Address (MUST BE FLORIDA STREET A) #106	<u>DDRE.</u>	<u>SS)</u>			
	West Palm Beach , FL	33401				2020 1
(b)	Daniel Craig-Hallam	-			•	: :
(0)	Enter name of NEW Registered Agent and/or NEW Registered C	Office 2	-ddi	ress:		2
						D.
	Daniel Craig-Hallam					Pii 12:
	NEW Registered Office Address:	-				23
	601 Heritage Drive #465					
	Jupiter , FL 3	3458				
agent v	imited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the line.	egiste oility c the lii mited	red om mit lia	office and ipany, it is led liability bility comp	the business offic hereby confirmed company or as officiany.	e of the registered
Signat	ure of a member or authorized representative of a member	Da -	niel	Craig-Halla		
I herel provisi he obli to mere totified	by decept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe igations of my position as registered agent as provided f ly reflect a change in the registered office address, I her I in writing of this change	e to ac erforn for in reby c	et ir nan Ch con,	e thia anna	Printed or typed name city. I further agreuties, and I am fan F.S. Or, if this do se limited liability	
Signatu	e of Registered Agent					

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