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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Fax Number

Phone

: (307)200-2803 : (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.\*\*

Email Address:\_

## LLC REGISTERED AGENT CHANGE INSIDERSPLACE CONSULTING LLC

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APR 1 5 2020

## 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	n.  ime of the limited liability company: Insi	dersplace Consu	ulting LLC
	2880 W OAKLAND PARK BLVI	D (b) 2880 \	W OAKLAND PARK BLVD
. (11)	Principal office address of limited liability co	inpany:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	SUITE 225C	SUITE	225C
	OAKLAND PARK, FL 33311	OAKLA	ND PARK, FL 33311
	05/14/2019	L19000	0130914
	Date of filing/registration in Florid	a 4.	Document number
()	REGISTERED AGENTS INC		
. (a)	Registered Agent and Registered Office shown on the	e records of the Florida Dept. of Sta	ate:
	3030 N. ROCKY POINT DR		
	Registered Office Address (MUST BE FLORIDA	A STREET ADDRESS)	202
	SUITE 150A		2020 APR
	Tampa	33607	· · · · · · · · · · · · · · · · · · ·
d.X	Northwest Registered A	_	AH II: 34
(h)	Enter name of NEW Registered Agent and/or NEW		
	7901 4th St N		· = 34
	NEW Registered Office Address:		
	STE 300		
	St. Petersburg	, FL 33702	

the articles of organization or the operating agreement of the limited liability company.

Morgan Noble

Signature of a member or authorized representative of a member Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Thursom Glover - Assistant Secretary

Signature of Registered Agent