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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: REGISTERED AGENTS INC.

Account Number : I20090000081

: (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 **B90 CONSULTING LLC**

Certificate of Status	0
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Page Count	02
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OCT 2 1 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.

1. Na	me of the limited liability company: B90 Con	sulti	ng LLC					
	300 SE 11TH ST	(b) 300 SE 11TH ST						
(u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited hability company: (Note: MAY BE POST OFFICE BOX)					
	POMPANO BEACH, FL 33060		POMPA	NO BEACH	, FL	33060		
	10/22/2019		L190002	65448				
3.	Date of filing/registration in Florida	4,		Document number	r			
5. (a)	LEGALINC CORPORATE SERVICES INC.							
J. (47	Registered Agent and Registered Office shown on the records o	f the Flori	da Dept. of State:					
	5237 SUMMERLIN COMMONS							
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE.	<u>SS)</u>					
	SUITE 400				,	دے		
	FORT MYERS	<sub>1.</sub> 3390	)7		 d	ZOZO OCT		
(b)	Registered Agents Inc.					T 20	. •	
<b>\</b> ,	Enter name of NEW Registered Agent and/or NEW Registere			P	. 1			
	7901 4th St N				٠	??		
	NEW Registered Office Address:				•	ယ		
	STE 300		<u> </u>					
	St. Petersburg	3370	)2					
			o tra	the test of the comband	a a d'i a	assed that	ofter	

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

D: 1	Riley Park
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.

Bill Havre - Assistant Secretary

Signature of Registered Agent