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COVER LETTER

Kocher Law Firm, PLLC					
Name of Limited Liability Company					
or filing.					
me Tetephone Number					
ion orations llahassee Street, Suite 810 (2303					
ied Copy					

TO:

Registration Section

. 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.

I. Na	me of the limited liability company: Kocher Law Fin	n, PELC		
2. (a)	150 East Palmetto Park Road, Suite 800		b) 150 East P	almetto Park Road, Suite 800
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	······································		dailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Boca Raton, FL 33432		Boca Rator	n. FL 33432
	11.41.42010	- -	1,190002734	2)
	11/14/2019			Document number
	Date of filing/registration in Fiorida	4.		Document number
5. (a)	Registered Agent and Registered Office shown on the records of Sydney Smith Kocher	t'the Flori	da Dept. of State	::
	Registered Office Address (MUST BE FLORIDA STREET) 2500 N. Military Trail, Suite 465	"ADDRE.	<u>SS)</u>	6.1
	Boca Raton, F	L_33431		
(h)				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>			
	Sydney Smith Kocher			- -
	NEW Registered Office Address:			
	150 East Palmetto Park Road, Suite 800			-
	Boca Raton, F	33432 L		
thange igent v vas/w	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registe iability of of the li e limited	red office and company, it is mited liability	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in apany.
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee
rovisi he obl o mer	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provided verteet a change in the registered office address. It in writing of this change.	e perfori ed for in	nance of my o Chapter 605	hities, and I am familiar with and accep , F.S. Or, if this document is being filed
Sinnam	Te of Registered Agent			