LZO 00010510Z

(Requestor's Name)									
(Address)									
(Address)									
(City/State/Zip/Phone #)									
PICK-UP WAIT MAIL									
(Business Entity Name)									
(Document Number)									
Certified Copies Certificates of Status									
Special Instructions to Filing Officer:									
3									

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Berg I - College Harton



COVER LETTER

TO:

INHS18 (2/14)

TO:	Registration Section Division of Corporations		
SUBJ	ECT: Resolve Development & Adviso	ry Group Name of Limited I	Liability Company
Dear :	Sir or Madam:		
The e	nclosed Registered Agent/Registered	Office Change and	d fee(s) are submitted for filing.
Please	e return all correspondence concerning	g this matter to the	e following:
Oluwa	ascun Falade		
	Name of Person		
Resol	ve Development & Advisory Group Firm/Company		
6927	Sawtooth Court Address		
Ococo	: City/State and Zip Cod	-	
int/v/i	Oresolveda.com	i.	
	E-mail address: (to be used for future arther information concerning this mat		fication)
		. / 107:	210 2255
<u>Qluw</u>	Name of Person	at (<u>407</u>	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 follow	ring amount:	
	■ \$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.	Na	ime of the limited liability company: Resolve Developm	ient &	Advisory Gro	ир				
2	(e)	Resolve Development & Advisory Group	ſ	(b) Resolve Development & Advisory Group					
۵.	(u)	Principal office address of limited liability company:	Mailing address of limited						
		(Note: MUST BE STREET ADDRESS)	(Note: MAY BE POST OFFICE BOX) 6927 Sawtooth Court						
		6927 Sawtooth Court							
		Ocoee, FL 34761	Ococe, FL 34761						
		144 7020		1.20000105	102				
3.		Date of filing/registration in Florida	4,	1,20000103	Document nu	unber			
5.	(a)	Resolve Development & Advisory Group			_				
	. ,	Registered Agent and Registered Office shown on the records of the	he Flori	ia Dept. of Stat	e:				
(b)		UNITED STATES CORPORATION AGENTS, INC.							
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				<u>≅</u> .	20121		
		5575 S. SEMORAN BLVD. SUITE 36		, <u>.</u>	_		· i i		
		ORLANDO, FL_	32822		_	2021 JUH 14 Paillainean			
							₽		
	(b)	Oluwaseun Falade			_	5-10	<u>-</u>	<u></u>	
		Enter name of NEW Registered Agent and/or NEW Registered	Office a	<u>ddress</u> :	AH 4:31				
		Resolve Development & Advisory Group	· · · · ·	<u></u>	_	حر			
		NEW Registered Office Address:							
		6927 Sawtooth Court			_				
		Ococe , FL	34761		_				
ch ag wa	ange ent v is/we	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	registe bility of f the li	red office an ompany, it i mited liabilit	id the business s hereby confi y company or	s office of irmed tha	t the re it the c	egistered hange(s)	
			<u>Ol</u>	uwas <mark>cun</mark> Fala	de	A			
		ture of a member or authorized representative of a member			Printed or type				
pr the to	ovisi 2 ohl merc	by accept the appointment as registered agent and agre- ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address. I had in writing of this change.	oertorr	iance of mv	aluties and La	ım tamıll	ar win	n ana acceni	
Si	gnatu	ire of Registered Agent							