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below) on the top and bottom of all pages of the document.



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Division of Corporations Fax Number : (850)617-6383

From:

Account Name: REGISTERED AGENTS INC.

Account Number: 12009000081 Phone: (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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JUL 24 AH 10: 2

## LLC REGISTERED AGENT CHANGE 1 ARMOSA CONSULTING LLC

Certificate of Status	0
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SECRETARY OF STATE

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## 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 Λrmos	'a (Co	neultina	allC		
1. N	ame of the limited liability company: 1 Armos					
2. (a)	315 W CONCORD ST	(t		CONCORD ST		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	APT 316		APT 32	<del></del>		_
	ORLANDO, FL 32801		ORLAN	DO, FL 32801		
	06/29/2020		L20000	180931		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	DARNELL E WILLIAMS					
J. (u)	Registered Agent and Registered Office shown on the records of	of the Florid	a Dept. of Stat	te:		
	315 W CONCORD ST				<u>د</u> م	
	gistered Office Address (MUST BE FLORIDA STREET ADDRESS)		Z.	920 1020		
	APT 316		<u></u>	=		11
	ORLANDO	ղ <sub>.</sub> 3280	1		2020 JUL 24	
(b)	Registered Agents Inc.			AM 10: 22	D	
	Enter name of NEW Registered Agent and/or NEW Register	ed Office ac	<u>ldress</u> :	HAIR MAIN	22	
	7901 4th St N					
	NEW Registered Office Address:	····		_		
	STE 300			_		
	St. Petersburg	<sub>FL</sub> 3370	2			
the chagent was/v	limited liability company is not organized under the nange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the street of	of the reg liability c s of the lir	istered offic company, it nited liabili	ce and the business offic is hereby confirmed that ity company or as othery	te of the	registered inge(s)
R	nature of a member or authorized representative of a member	Ril	ey Park	Printed or typed name of s	Gener	
Lhar	aby accept the appointment as registered agent and	ioree to a	et in this ca.	vacity I further agree t	to compl	y with the
provi the ol to me notifj	sions of all statutes relative to the proper and comple bligations of my position as registered agent as provi rely reflect a change in the registered office address, ed in writing of this change.	ue perjorn ded for in	nance of my Chapter 60 confirm tha	s auties, una r um jamiii )5. F.S. Or. if this docu	ment is l	eing filed

Signature of Registered Agent