L20000193295

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
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Account#: I20000000088

Date:	09/12/2023					
Name:		_				
Reference #	2096597	<u> </u>				
Entity Name	ARIA TITLE C	ONSULTANTS, LLC				
☐ Article ☐ Amer ☐ Chan	es of Incorporation/Authorization ndment nge of Agent statement version					
Disso	☐ Dissolution/Withdrawal ☐ Fictitious Name					
	r					
Authorized	Amount: \$25.00					

F: 800.944.6607

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:	ARIA TITLE CO	DNSULTANTS, LLC	
2.	(a)		(b)		
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
182 WOODMONT CIRCLE		182 WOODMONT CIRCLE	182 WOODMONT CIRCLE		
		RIVERVALE, NJ 07675		RIVERVALE, NJ 07675	
		07/07/2020		L20000193295	
3.		Date of filing/registration in Florida	4.	Document number	
5.	(a)				
		Registered Agent and Registered Office shown on the records of the	Florida Dept, of State	2073 SEP 12	
CORPORATION SERVICE COMPAN Registered Office Address (MUST BE FLORIDA STREET A)					
		1201 HAYS ST			
		Tallahassee .FL_	32301	PH 12: 04	
	/ L . x	Cogency Global Inc.		204	
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Off		•	
		115 North Calhoun Street, Suite 4		-	
		NEW Registered Office Address:			
				•	
		Tallahassee , FL_	32301	-	
th ag wa	e cha ent v as/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of the cles of organization or the operating agreement of the line.	e registered office lity company, it is he limited liability	e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in	
		/s/ Adrienne Mann		Authorized Member	
	Signa	ture of a member or authorized representative of a member		Printed or typed name of signee	
pr th to	ovisi e obl mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe- igations of my position as registered agent as provided for Ay reflect a change in the registered office address. I her If in writing of this change.	to act in this caperformance of my of in Chapter 605 or in Chapter 605 or in that	acity. I further agree to comply with the duties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been	
/s/ Ashley Cepin Ash			hley Cepin, Asst. Secretary		
,7	ignatti		. 6227 a Tallahaa		