L20000241862

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

	gistration Section vision of Corporations		
SUBJECT	TRANSFORMATION TECHNOLOGY (CONSULTAN	ETS LLC
		Limited Liab	pility Company
Dear Sir or	Madam:		
The enclose	ed Registered Agent/Registered Office C	lhange and fe	e(s) are submitted for filing.
Please retur	rn all correspondence concerning this ma	itter to the fo	llowing:
Juan Gaitan			
	Name of Person		-
Talento			
	Firm/Company		-
255 Alhamb	ora Cir Ste 400		
	Address		-
Coral Gable	s. FL 33134		
	City/State and Zip Code		-
jgaitan@tale	entohem.com		
E-mai	il address: (to be used for future annual r	eport notifica	ation)
For further	information concerning this matter, plea	se call:	
Juan Gaitan		954 t (6128004
	Name of Person	\	Area Code & Daytime Telephone Number
Ma	ailing Address:		Street Address:
	gistration Section		Registration Section
	vision of Corporations		Division of Corporations
	D. Box 6327		The Centre of Tallahassee
l al	Hahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
En	closed is a check for the following amo	ount:	
	\$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.

(a)	690 Bird Rd	(b) 25	(b) 255 Albambra Cir Ste 400		
(11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Coral Gables FL 33146		oral Gables FL 33134		
	08/10/2020	1.20	000241862		
(a)	Date of filing/registration in Florida UNITED STATES CORPORATION AGENTS, INC.	4,	Document number		
(41)	Registered Agent and Registered Office shown on the records 476 RIVERSIDE AVE.	ot, of State:			
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	· ·		
	JACKSONVILLE	FL_32202			
(b)	Talento, Inc				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office addres	<u>s</u> :		
	255 Alhambra Cir				
	NEW Registered Office Address:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Ste 400				
	Coral Gables	33134 FL			
ange ent w is/we	imited liability company is not organized under the lor changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the first street.	he registered of liability compa s of the limited	ffice and the business office of the registered my, it is hereby confirmed that the change(s) hability company or as otherwise provided in lity company.		
	tyc of a member or authorized representative of a member				

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00