**Division of Corporations** 



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

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Account Number	:	12009000081	
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LLC REGISTERED AGENT CHANGE 23 ALL ANA SEPTEMENT CUANTICO ADVISORS, LLC ö ЫЧ Certificate of Status 0 Certified Copy 0 2022 JAN - 3 JAN 0 4 2022 02 Page Count S. PRATHER Estimated Charge \$25.00

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FICE

## 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. Name of the limited liability company: CUANTIC	CO ADVISO	DRS, LLC		
2. (a) 350 S MIAMI AVE.	(b) 350 S MIAMI AVE.			
Principal office address of limited liability company: ( <u>Note: MUST RE STREET ADDRESS</u> )	···· · · · · · · · · · · · · · · · · ·	Mailing address of limited li ( <u>Note: MAY BE POST (</u>	-	
1912	1912			
MIAMI, FL 33130	MIAMI, I	FL 33130		
01/01/21	L2100	0012924		
3. Date of filing/registration in Florida	4.	Document number		
5. (a) JOSE O ESQUERDO				
Registered Agent and Registered Office shown on the records of	the Florida Dept. of Stat	- e:		
350 S MIAMI AVE.			20 TAL	
Registered Office Address (MUST BE FLORIDA STREET.	-			
1912			2022 JAN - 3	<u>ا</u> ت.
MIAMI	33130	-		TILED
(b) Registered Agents Inc. Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 7901 4th St N <u>NEW</u> Registered Office Address: STE 300	<u>l Office address</u> :	-	AM 10: 57 OF STATE E. FLORIDA	
012 000	· · · · · · · · · · · · · · · · · · ·	-		
St. Petersburg	33702	_		
If the limited liability company is not organized under the lat the change or changes are made, the Florida street address of agent will be identical. Or, in the case of a Florida limited li was/were authorized by an affirmative vote of the members of the articles of or <del>ganization</del> or the operating agreement of the	f the registered offic ability company, it i of the limited liabilit	e and the business offic is hereby confirmed that iy company or as other	ce of the register at the change(s)	
Rilus Tark	Riley Park			
Signature of a member or authorized representative of a member I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complete the obligations of my position as registered agent as provide to merely reflect a change in the registered office address, I notified in writing of this change. But here Bill Havre - Assistar Signature of Registered Agent	e performance of my ed for in Chapter 60.	duties, and I am famili 5, F.S. Or, if this docu	to comply with th iar with and acce ment is being file	ept –

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

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