

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000172452 3)))



H230001724523ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (855)330-1010

**Enter	the	email a	address	for	this	busin	ess	entity	to	be u	ised	for	future
an	nual	report	mailin	gs.	Enter	only	one	email	add:	ress	plea	ase.	* *

Ema	41	Addroce	

LLC REGISTERED AGENT CHANGE GOREX CONSULTING SERVICES, LLC

المترافقة بالمتراف المترافين المترافي المترافي المترافي المترافي المترافق المترافق المترافق المترافق المترافق	
Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

T. LEMEUX. MAY 10 2003。

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.

rtori			NU TINO OFFICE COS
1. 2	Same of the limited liability company: GORE	X CONS	SULTING SERVICES, LLC
2. (a	1	(b)	
\-	Principal office address of limited liability company (Nate: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		-	2100002450
_	02/25/21		.21000093459
3.	Date of filing/registration in Florida	4.	Document number
5. (a			
	Registered Agent and Registered Office shown on the record	ds of the Florida D	Dept. of State:
	4958 San Martino Dr		
	Registered Office Address (MUST BE FLORIDA STRI	EET ADDRESS)	
	Wesley Chapel	. FL 33543	<u> </u>
	Northwest Desistand Ages		0237
(b			
	Enter name of NEW Registered Agent and/or NEW Registered	tered Office addr	ess:
	7901 4th St N		2023 Mac/- 9 PH
	NEW Registered Office Address:		ယ္
	STE 300		- ω - χ
	St. Petersburg	FL_33702	
the clagent was/v	limited liability company is not organized under the hange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limite were authorized by an affirmative vote of the memberticles of organization or the operating agreement of	ss of the registe ed liability com ters of the limite f the limited lia	ered office and the business office of the registered apany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
Sign	nature of a member or authorized representative of a member	<u> </u>	Printed or typed name of signee
provi the o. to me	reby accept the appointment as registered agent and sions of all statutes relative to the proper and completions of my position as registered agent as properly reflect a change in the registered office addressed in writing of this change.	l agree to act in olete performan wided for in Ch ss, I hereby con	n this capacity. I further agree to comply with the nce of my duties, and I am familiar with and accep papter 605, F.S. Or, if this document is being filed afirm that the limited liability company has been

Signature of Registered Agent

- Assistant Secretary

Taylor Newman