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## LLC REGISTERED AGENT CHANGE AUGUSTIN MEDIATION AND CONSULTING GROUP, LLC

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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. Na	me of the limited liability company: AUGUSTIN N	MEDIAI	TON AND	D CONSULTING GROUP, LLC			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (b)		Darling address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	07/26/2021		L210003	20276			
3.	Date of filing/registration in Florida	4.		Document number			
<b>.</b>	· · · ·						
5. (a)	AUGUSTIN, SHREENA P Registered Agent and Registered Office shown on the records of the	e Flouda I	Sect of State				
	Registered Office Address (MUST BE FLORIDA STREET AI	401 W ATLANTIC AVE					
	R10 UNIT #216	202					
	DELRAY BEACH FL.	33444		الدن الات			
				2023 F'R 22 PH			
(b)	Northwest Registered Agent LLC	22					
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	Office addr	ess:				
	2004 4/1 0:11			7: 33 7: 034 1: 034			
	7901 4th St N			<u></u>			
	NEW Registered Office Address:			<del>.</del>			
	STE 300						
	St. Petersburg , FL 3	33702	***************************************				
the cha agent w was/we the artic	mited liability company is not organized under the lawsinge or changes are made, the Florida street address of the file of the did not case of a Florida limited liabilities authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liability of a member of authorized representative of a member.	he registe pility com the limit	ered office ipany, it is ed liability bility com	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.			
.,	'			Printed or typed name of signee			
provision the obli to mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete partions of my position as registered agent as provided by reflect a change in the registered office address. I he is not provided in the properties of this change.	e to act il erformai for in Ch rreby con	n this capa ice of my a iapter 605, firm that t	ecity. I further agree to comply with the luties, and I am familiar with and accept .F.S. Or, if this document is being filed he limited liability company has been			
Xignatur	Taylor Newman - Assistant Secretary of Registered Agent						

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