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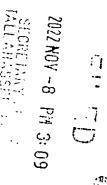
(Re	questor's Name)				
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· COVER LETTER

	•	COVER	LETTER •	1 ₃ ;
	Registration Section Division of Corporations		•	,
SUBJE	HAWKSBILL CONSULTING, LLC	C		
SODUL		me of Limited I	Liability Company	
Dear Sir	or Madam:			
The enc	losed Registered Agent/Registered Off	fice Change and	d fee(s) are submitted for filin	ıg.
Please re	eturn all correspondence concerning th	nis matter to the	following:	
Cheri Ka	artzmark			
	Name of Person		<u> </u>	
Motsche	nbacher & Blattner LLP			
	Firm/Company	· · · · · · · · · · · · · · · · · · ·		
117 CW	, .			
	Taylor St Ste. 300 Address			
Portland	, OR 97204			
	City/State and Zip Code			
	ark@portlaw.com mail address: (to be used for future and	nual report noti	fication)	
	her information concerning this matter	-	,	
Cheri Ka	-	503	417-0519	
	Name of Person	at (Area Code & Daytime Te	lephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporation The Centre of Tallahas 2415 N. Monroe Street Tallahassee, FL 32303	see
	Enclosed is a check for the following	g amount:		
	■ \$25 Filing Fee	-	\$55 Filing Fee & Certified Co	рру
INHS18	(2/14)			

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. N	ame of the limited liability company: HAWKSBILL	CONSULTING.	LLC			
2 (a)		(b)				
2. (a)	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) 2431 Aloma Ave PMB 1002			
	1671 Oakhurst Ave					
	Winter Park, FL 32789		Winter Park, FL 32792			
	07/26/2021	L21	000339795			
3.	Date of filing/registration in Florida	 4	Document no	umber		
	• •					
5. (a)	Registered Agent and Registered Office shown on the records	at the Florida Den	at of State			
	Mimioglu, Gorken	or the Florida Dep	a, or state.			
		CIT ADDDCCC				
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDKESSI				
	7307 SANDSCOVE COURT, SUITE 7			20 2		
	WINTER PARK	FL_32792		ECR LA		
				CT 11 SECRETATO ALLEAHASSE		
(b)						
(-7	Enter name of NEW Registered Agent and/or NEW Registe					
	Mimioglu, Gorken			<u>ن</u>		
	NEW Registered Office Address:			60 69		
	2431 Aloma Ave PMB 1002			<u>ت</u>		
	Winter Park	FI 32792				
		1 L				
chang agent was/w the art	limited liability company is not organized under the e or changes are made, the Florida street address of a will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the street and the street are considered.	the registered of I liability compairs of the limited the limited liabi	ffice and the busines any, it is hereby conf liability company o	s office of the registered irmed that the change(s)		
Sign	Gorken Mimiog ignature of a member or authorized representative of a member			Printed or typed name of signee		
I here provis the ob to me	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple digations of my position as registered agent as provi rely reflect a change in the registered office address, and in writing of this change.	agree to act in t ele performance ided for in Chap . I hereby confir	his capacity. I further of my duties, and I one of the following that the limited licenter that the licenter that th	er agree to comply with the am familiar with and accept this document is being filed ability company has been		
C:	Gorken					
Signat	ure of Registered Agent					