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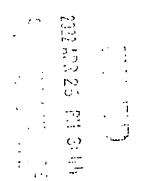
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## COVER LETTER

10:	Division of Corporations		•	•	
CHD	TOP TIER LEGAL SEARCH LLC				
SUD		e of Limited I	iability Company		
Dear	Sir or Madam:				
The e	enclosed Registered Agent/Registered Offic	ce Change and	d fee(s) are submitted for fil	ing.	
Please	e return all correspondence concerning this	s matter to the	following:		
Becca	a Levine				
	Name of Person		<u> </u>		
Тор Т	ier Legal Search				
	Firm/Company		<u> </u>		
20423	3 State Road 7, Suite F6-169			60	
	Address		<u> </u>		
Boca	Raton, FL 33498				
	City/State and Zip Code		<del></del>		
eric@	toptierlegal.com			· ·	
	E-mail address: (to be used for future annu	ial report noti	fication)	f , +1	
For fi	urther information concerning this matter.	please call:			
Becca	1 Levine	646 at (	397-2250		
	Name of Person	(	Area Code & Daytime T	elephone Number	
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Enclosed is a check for the following	amount:			
	<b>፟</b> \$25 Filing Fee	<u> </u>	\$55 Filing Fee & Certified C	Сору	
1NHS	18 (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. No	ame of the limited liability company: TOP TIER LEGA	L SEA	RC						
2. (a)	20423 State Road 7, Suite F6-169		(b	20423 S	state Road 7, Suite I	F6-169			
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_			Mailing address of (Note: MAY BE			-	-
	Boca Raton, FL 33498			Boca Rat	ton, FL 33498				
		_							
	Jan. 18, 2022		1	.2200003	4920				
3.	Date of filing/registration in Florida	4.	_		Document nun	ıber			
5. (a)	FOX MCCLUSKEY BUSH ROBISON, PLLC								
J. (a)	Registered Agent and Registered Office shown on the records of t	he Flor	ida	Dept. of St	tate:				
	3461 SE WILLOUGHBY BLVD								
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE	SS						
							, ·.	رج	
	STUART	3 100 1				:		122	r "1
	FL,	34994			<u> </u>	í	٠,	ڙسة زير	
/ I- A	ATLAS SOLOMON, PLLC						:	(1)	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office	add	ress:	<del></del>			# TT	. }
				<del></del>				 رئ	]
	789 SW FEDERAL HIGHWAY							3: 1:4	
	NEW Registered Office Address:				<del></del>			-	
	SUITE 206								
	STUART , FL	34994							
change agent v was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the law ture of a member or authorized representative of a member.	registe bility f the li imited Re	erec eor imi d li: ebec	I office a npany, it ted liabil ability co cca Levine	and the business of is hereby confirm lity company or as ompany.  Printed or typed r	office of the of	of the reat the c wise p	egistere hange( rovided	ed s) I in
provisi the obl to merc notified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position at registered agent as provided ely reflect a change in the registered office address. I have the control of this change to the control of this change to the control of the change to the control of the change to the control of th	perfor in for in ereby	mai i Ci coi	nce of mi hapter 60 ifirm tha	v duties, ànd 1 am 15, F.S. Or, if thi, t the limited liabi	agree ( Jamili s docu lity co	to com ar with ment is mpany	pty with i and a i being has be	n the ecept filed en

**FILING FEE: \$25.00**