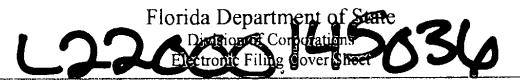
From: Sylvia Pa

4/20/22, 10:39 AM

Division of Corporations



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	COVER L	ETTER .		
TO: Registration Section Division of Corporations				
LAKEWOOD CONSULTAN	ITS LLC			
	ne of Limited Li	ability Company		
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.		
Please return all correspondence concerning th	is matter to the	following:		
Cheyenne Moseley				
Name of Person		_		
Legalzoom.com, Inc.				
Firm/Company		 -		
101 N. Brand Blvd., 10th Floor				
Address		_		
Glendale, CA 91203				
City/State and Zip Code		_ _		
john_murray@cox.net				
E-mail address: (to be used for future and	nual report notifi	ication)		
For further information concerning this matter.	, please call:			
Cheyenne Moseley	800 at (773-0888 ext 9724		
Name of Person	at (Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Div P.C	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following	g amount:			
□ \$25 Filing Fee	2 \$5	55 Filing Fee & Certified Copy		

LegalZoom.com, Inc.

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	lame of the limited liability company:	CON	SULTANT	SLLC			
2. (a)	, , ,	·- (b)				
2. (ų)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX)					
	5850 Colfax Ave		5850 Colfax Ave				
	Alexandria, Virginia 22311	 ,	Alexandi	ria, Virginia	22311		
	03/24/2022		L2200014	45036		,	,
3.	Date of filing/registration in Florida	4.	, !	Document nui	nber		
5. (a)	}						
J. (E.	Registered Agent and Registered Office shown on the records of CHEYENNE MOSELEY	the Florid	a Dept. of State	:			
	Registered Office Address (MUST RE FLORIDA STREET)	ADDRES	2)				
	5575 S. SEMORAN BLVD. SUITE 36				•		
	ORLANDO , FL	32822	<u> </u>		٠		
(L)	United States Corporation Agents, Inc.			•	<u> </u>	2022	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	ldress		4:	022 APR	
		,		. ,		R 20	
	NEW Registered Office Address:				- 	PH 5	j 🗀 .
			·			က်	;
				•	्न:	24	
		·					
the cha agent v was/we the arti	imited liability company is not organized under the law inge or changes are made, the Florida street address of will 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	vs of the the regi ability co of the lin limited	stered office ompany, it is nited liability liability comp nn P Murray	and the busing hereby confirmed on a company or a company.	ess office of med that the is otherwise	that afte the regist change(s provided	e:)
	ture of a member or authorized representative of a member			Printed or typed			-
ine obi to merc	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I I	ce to ac perform d for in the hereby c	i in this capae ance of my d Chapter 605, onfirm that th	city. I further uties, and I an F.S. Or, if th he limited liab	agree to cor n familiar wi is document vility compan	mply with ith and ac is being f iy has bee	the reept Hed n
notifiet	I in writing of this change.	CHE	YENNE MOSEL	EY, ASSISTANT	SECRETARY		
Signatus	re of Registered Agent	O. •••					