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TO:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I2009000081 Phone : (307)200-2803 : (855)330-1010 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		

LLC REGISTERED AGENT CHANGE AMP CONSULTING SERVICES 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

	ame of the limited liability company: AMP Co						
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 7901 4th St N STE 300	(b)					
	St. Petersburg FL 33702	St. Petersburg FL 33702					
	05/25/22		L2200	0243468			
3.5. (a)	Date of filing/registration in Florida POLANCO, ABRAHAM	 4.		Document number			
υ. (n)	Registered Agent and Registered Office shown on the records of 10072 SAGE CREEK DRIVE Registered Office Address (MUST BE FLORIDA STREET)	:					
(0)	RUSKIN , FI			2023 JA			
	Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered			2023 JAN 11 AM 9: 3	:		
	7901 4th St N			.e µv	! ;"		
	NEW Registered Office Address: STE 300		. •	37			
	St. Petersburg, FI	<u>3</u> 370	2				
the cha agent v was/wa the arti	imited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	f the regiability (of the li c limited	gistered office company, it is mited liability	and the business offichereby confirmed the company or as other upany.	ice of the at the cha	register inge(s)	

Signature of a member or authorized representative of a member Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been

David Roberts - Assistant Secretary

Signature of Registered Agent