

Florida Department of State A Direction of Compragions

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000356271 3)))



H220003562713ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone Fax Number : (855)330-1010

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

Email Add	ress:			

LLC REGISTERED AGENT CHANGE DK GOLDEN CONSULTING LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

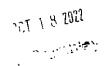


26?? OC

Electronic Filing Menu

Corporate Filing Menu

Help



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 1071a		den Cor	nsulting LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) _	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3,	09/28/2022 Date of filing/registration in Florida		22000420472 Document number
5. (a)	DANIEL KOVACH		
(b)	Registered Agents Inc	T ADDRESS)	2022 OCT
	St. Petersburg	_{FL} 33702	
the chagent was/w the art Sign I here provis the obto men	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the florida limited agreement of the proper and completely accept the appointment as registered agent and a sions of all statutes relative to the proper and completely reflect a change in the registered office address.	of the register liability comps of the limite limited liab Riley agree to act in the performance ded for in Che	red office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in polity company. Park Printed or typed name of signee A this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept agree 605. F.S. Or, if this document is being filed

Signature of Registered Agent

Bill Havre

- Assistant Secretary