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A. RIVERS MAY 1 0 2023

COVER LETTER

TO: Registration Section Division of Corporations					
GOTTUSO LEGAL CONSULTING LLC SUBJECT:					
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter	r to the following:				
John Park					
Name of Person					
CFS INC					
Firm/Company					
101 Hopkins Street, Unit 6					
Address					
Wakefield, MA 01880					
City/State and Zip Code					
ctsjohn@hotmail.com					
E-mail address: (to be used for future annual repo	ort notification)				
For further information concerning this matter, please c	rall:				
John Park 7 at (81 390-0090				
Name of Person	Area Code & Daytime Telephone 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	t:				
☐ \$25 Filling Fee	■ \$55 Filing Fee & Certified Copy				

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.	dame of the limited liability company: GOTTUSO LEG	ial coi	NSULTING	GLLC
2. (a	35 SOUTHPORT LANE	(b) 35 SOUTHPORT LANE		
(Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	APT, F		APT. F	:
	BOYNTON BEACH, FL 33436		BOYN	TON BEACH, FL 33436
	01/34/2023		1.230000	058176
3.	Date of filing/registration in Florida GATTUSO, RICHARD	4.		Document number
5. (8	Registered Agent and Registered Office shown on the records of 35 SOUTHPORT LANE	the Flori	da Dept. of :	State:
	Registered Office Address - <u>(MUST BE FLORIDA STREET</u> APT, F	ADDRE.	<u>58)</u>	
	BOYNTON BEACH FI	33436 L		
(b	GOTTUSO, RICHARD			2029 FEB
`	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office a	iddress:	24
	NEW Registered Office Address:	-		一 年 8: 34 一
chang agent was/v	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	ws of the registenability confither the	e State of red office ompany, i nited liab	Florida, it is hereby confirmed that after the and the business office of the registered it is hereby confirmed that the change(s) illity company or as otherwise provided in
	1/1 / May	GC	OTTUSO, I	RICHARD
Sign	ature of a member of authorized representative of a member			Printed or typed name of signee
provi, the of to me notifi	eby accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I had in writing of this change.	ce to ac perforn d for in hereby c	t in this co nance of m Chapter 6 confirm th	apacity. I further agree to comply with the ny duties, and I am familiar with and accept 505, F.S. Or, if this document is being filed at the limited liability company has been
Signat	ure or Registered Agent			

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25,00