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August 13, 2023

BRIAN LINICH 655 3RD AVE N, APT. C SAFETY HARBOR, FL 34695 US

SUBJECT: LINICH CONSULTING LLC

Ref. Number: L23000286969

We have received your document for LINICH CONSULTING LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham Regulatory Specialist III Director's Office

Letter Number: 223A00018496

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COVER LETTER

TO: Registration Section Division of Corporations		
LINICH CONSULTING, LLC SUBJECT:		
	Name of Limited	Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change an	nd fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to th	e following:
BRIAN LINICH		
Name of Person		
LINICH CONSULTING, LLC		
Firm/Company		
655 3RD AVE N APT C		
Address		
SAFETY HARBOR, FL 34695		
City/State and Zip Cod	le	
belinich@gmail.com		
E-mail address: (to be used for future	annual report not	ification)
For further information concerning this mat	ter, please call:	
BRIAN LINICH	440	773-4857
Name of Person	(773-4857
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 follow	ing amount:	
■ \$25 Filing Fee		\$55 Filing Fee & Certified Copy
INHS18 (2/14)		

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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 Florida.

(a)	655 3RD AVE N APT C SAFETY HARBOR, FL 34695	(b)	(b) 655 3RD AVE N APT C SAFETY HARBOR, FL 346		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited (Note: MAY BE POST)		
			·· ··- ··-		
	6/13/2023		00286969		
	Date of filing/registration in Florida	٠١.	Document number		
(a)	UNITED STATES CORPORATION AGENTS, INC				
	Registered Agent and Registered Office shown on the records of	the Florida Dept	, of State:	2,007	
	Registered Office Address (MUST BE FLORIDA STREET) 476 RIVERSIDE AVE.	<u>ADDRESS)</u>			
	JACKSONVILLE	32202		2	
(b)	BRIAN LINICH			7:38	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:		₩.	
	NEW Registered Office Address:				
	655 3RD AVE N APT C				
	SAFETY HARBOR, FI	34695			
iange jent v as/we	mited 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 like authorized by an affirmative vote of the members of the organization or the operating agreement of the	registered off ability compar of the limited [fice and the business office only, it is hereby confirmed that tiability company or as other	f the registered it the change(s)	
		BRIAN L	INICH		

Thereby 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. I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent