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AUG 2 9 2019 S. YOUNG



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Seeman ashley.seeman@cscglobal.com

Date: August 19, 2019

Order#: 858492-037

Re: SORRENTO PACIFIC FINANCIAL, LLC

Enclosed please find:

XX __ Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ashley Seeman c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

OUCA.XCOA

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)	10150 Meanley Drive 1st F	loor	(b)	10150 [Meanley Driv	e 1st Floor
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	SAN DIEGO	CA 92131		SAN DIE	GO, CA 921	31
	01/26/2006			M0600000	00603	
	Date of filing/regis	tration in Florida	4.		Document r	ານເmber
(a)	COGENCY GLOBAL INC	n.				
(a)	Registered Agent and Registered		s of the Florida I	Dept, of State	: ::	
				•		
	115 NORTH CALHOUN S Registered Office Address (M.	UST BE FLORIDA STRE	ET ANDRECE			
	Registered Office Address [M	OST DI. I EVRIDA STRE	LI ADIJELSSI			1
	TALLAHASSEE		FL 32301			
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		11. 32301			
(b)	Corporation Service Comp	เลกง				
(U)	Enter name of NEW Registered		red Office add	ress:		
			_ .			
	1201 Hays Street					
	NEW Registered Office Address:					1
	-					
						j
	Tallahassee	;	FL 32301			
cha nt w s/we	mited liability company is n nge or changes are made, the vill be identical. Or, in the c re authorized by an affirmat cles of organization or the or	e Florida street address ase of a Florida limited ive vote of the member	s of the regist I liability con rs of the limit	ered office npany, it is ted liability	and the bus hereby con: company o	iness office of the registe firmed that the change(s)
	Jac (, W	ZMCC	Jill Ci	lmi, Author	ized Person	
-	ure of a member or authorized repr					ed name of signee
	y acce pt the appointment as ons of all statutes relative to gations of my position as re	the proper and compl	ete performai	nce of my o	luties and L	am familiar with and occ

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00