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(Re	questor's Name)							
(Ad	dress)							
(Ad	dress)							
(City/State/Zip/Phone #)								
PICK-UP	☐ WAIT	MAIL						
(Bu	siness Entity Nar	ne)						
(Do	cument Number)							
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SECRETARY OF STATE

COVER LETTER

	Registration Section Division of Corporations							
SUBJE	GTW CONSULTANTS & AS	SSOCIATES, I	LC					
		ne of Limited Lia	bility Company					
Dear Si	r or Madam:							
The enc	losed Registered Agent/Registered Off	ice Change and f	ee(s) are submitted for filing.					
Please r	eturn all correspondence concerning th	is matter to the fo	ollowing:					
JC Ca	stellanos							
	Name of Person	·	_					
Unisea	arch, Inc.							
	Firm/Company		_					
25909	Pala, Suite 180							
	Address		_					
Missio	on Viejo, CA 92691							
	City/State and Zip Code		-					
	mail address: (to be used for future ann		ation)					
For furt	her information concerning this matter,	please call:						
JC Ca	stellanos	800 at (359-4228					
	Name of Person		Area Code & Daytime Telephone Number					
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Divi P.O.	ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, Florida 32314					
	Enclosed is a check for the following amount:							
	☑ \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy					

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.	Na	me of the limited liability company: GTW CONS	ULTAN	NTS	8 & ASS	OCIATES, LLC			
	` , -	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		. , ,		Mailing address of limited liabil (Note: MAY BE POST OFF	ity co	ուրու	v:
		3000 C STREET, STE 301			3000 C	STREET, STE 301			
		ANCHORAGE, AK 99503		_	ANCHO	RAGE, AK 99503			
		11/16/2010		N	1100000	005051			
3.		Date of filing/registration in Florida	4.	_		Document number			
5.	(a)								
•	(4)	Registered Agent and Registered Office shown on the records of NRAI SERVICES, INC	f the Flori	da L	Pept, of Stat	– ए:			
		Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>SS)</u>		_			
	1200 South Pine Island Road					م ا د	n C	20	
		Plantation , Fl	L_33324	4				2019 JAN 24	"T
						₩.	. !	21	क्याराज्य ग्राम्थान
	(b) .	Enter name of NEW Registered Agent and/or NEW Registered	d Office a	ddr	O.Y.	- SXS		<u> </u>	
					<u></u> -	The state of the s	i .		
		Unisearch, Inc.				근	9	<u>ရှ</u> သ	- Carry
		NEW Registered Office Address:						_	
		155 Office Plaza Drive				-			
		Tallahassee, FI	L_3230	1		_			
the age wa	chai ent w s/we	mited liability company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited line authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the reg iability of of the li	giste con mit	ered offic ipany, it i ed liabilit	c and the business office of shereby confirmed that the y company or as otherwise	f the e ch	regi ange	stered (s)
		Do Mille	Kr —	ris l	Vicholas	<u> </u>			
I h pro the to i noi	ereh visia obli mere ifiea	or of a member or withorized representative of a member by accept the appointment as registered agent and agent of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this change. He of Registated gent Jose Castellanos, Assistant Secretary	gree to a e perfori ed for in hereby	ct ii mar Ch con	n this cap ice of my apter 602 firm that	Printed or typed name of signo acity. I further agree to c duties, and I am familiar v 5, F.S. Or, if this documen the limited liability compo	วทอ	ly wit and c heing as h	th the accept filed sen

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