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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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COVER LETTER

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TO:	Registration Section Division of Corporations		
SUBJI	CHENEGA TOTAL ASSET	PROTECTION	ON, LLC
3000		ne of Limited L	iability Company
Dear S	Sir or Madam:		
The en	nclosed Registered Agent/Registered Off	fice Change and	fee(s) are submitted for filing.
Please	return all correspondence concerning th	nis matter to the	following:
JC C	astellanos		
	Name of Person		
Unise	earch, Inc.		
	Firm/Company		
2590	9 Pala, Suite 180		
	Address		_
Missi	ion Viejo, CA 92691		
	City/State and Zip Code		_
	-mail address: (to be used for future ann	nual report noti	lication)
For fu	rther information concerning this matter	, please call:	
JC C	astellanos	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	Re Di P.	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 illahassee, Florida 32314
	Enclosed is a check for the following	g amount:	
	☑ \$25 Filing Fee	□ s	55 Filing Fee & Certified Copy
INHSI	8 (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. N	ame of the limited liability company: CHENEGA T	OTAL	ASSET P	ROTECTION, LL	_C		
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)			y:		
	3000 C STREET, STE 301		3000 C	STREET, STE 3	301		
	ANCHORAGE, AK 99503		ANCHO	ORAGE, AK 9950)3		
	1/23/2013		M13000	0000475			
3.	Date of filing/registration in Florida	4.	· · · · ·	Document number	r		
5. (a)							
J. (a)	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of Sta	ute:			
	NRAI SERVICES, INC						
	Registered Office Address (MUST BE FLORIDA STREET	<u>ADDRES:</u>	<u>s</u>	_	ري الدارات:	201	
	1200 South Pine Island Road				70	رل وا	# PLTS:
	Plantation , FI	33324	•			2019 JAN 24	The state of the s
				_	388E		9
(b)	Enter name of NEW Registered Agent and/or NEW Registered			_	illisti Divy	7	
	Enter name of NEW Registered Agent and/or NEW Registered	1 Office ad	dress:			9: 30	O
	Unisearch, Inc.				بُندا	õ	
	NEW Registered Office Address:			_			
	155 Office Plaza Drive			_			
	Tallahassee	32301					
signa I here provise the objeto mer	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the ware of a member of authorized representative of a member obvious of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I din writing of this change.	f the reginability coof the limited Kri ree to ac	stered officompany, it nited liability eo s Nichola	ce and the business of is hereby confirmed ity company or as of impany. Printed or typed name pacity. I further agr	office of that the cherwise p	he regichange brovide	istered e(s) ed in

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