## 113000005102

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(======================================						
(Document Number)						
opies Certificates of Status						
nstructions to Filing Officer:						
Office Use Only						



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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	01/12/2021	
	Chris Vick	_
	e #: <b>1302582</b>	_
Entity Nai	me:CHENEGA M	ANAGEMENT, LLC
☐ Art	ticles of Incorporation/Authorization	to Transact Business
☐ An	nendment	
<b>☑</b> Ch	nange of Agent	
☐ Re	einstatement	
☐ Co	onversion	
	erger	
Dis	ssolution/Withdrawal	
☐ Fic	ctitious Name	
Ot	her	
Authorize Signature	ed Amount: \$25.00	

1,

F: +852.2682.9790

## TATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

resuant to the provisions of sections 605,0114 or 605,0116, Florida Statutes, the undersigned limited liability company abmits the following statement in order to change its registered office or registered agent, or both, in the State of forida

ame of the limited liability company: _	CHENEGA MANA	GEMENT, LLC
Principal office address of limited liabi	(	b)
(Note: MUST BE STREET AD		(Note: MAY BE POST OFFICE BOX)
No Change		No Change
August 14, 2013		M13000005102
Date of filing/registration in l	Florida 4.	Document number
UNISEARCH, INC.		
Registered Agent and Registered Office shown	on the records of the Florid	da Dept, of State:
155 OFFICE PLAZA DRIVE		
Registered Office Address (MUST BE FLO	ORIDA STREET ADDRES	2020 JAN 12 AM 8: 27
TALLAHASSEE	. FL 3230	1 2
COGENCY GLOBAL INC.		· 프
Enter name of NEW Registered Agent and/or	NEW Registered Office a	ddress:
115 North Calhoun St., Suite 4		27
NEW Registered Office Address:		
Tallahassee	FL 3230	1

f the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after he change or changes are made, the Florida street address of the registered office and the business office of the registered igent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in he articles of organization or the operating agreement of the limited liability company.

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Peter Nosek

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby 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 he obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed a 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.

/s/ Tim Mayville

Signature of Registered Agent

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