

MI300007921

(Requestor's Name)

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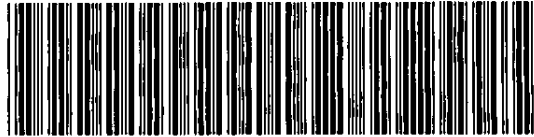
(Business Entity Name)

(Document Number)

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DATE: 7/29/16

NAME: EIKON CONSULTING GROUP, LLC

TYPE OF FILING: CHANGE OF AGENT

COST: 25.00

RETURN: PLAIN COPY PLEASE

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ACCOUNT: FCA000000015

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____

Eikon Consulting Group, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TERI STAPLETON

Name of Person

UNISEARCH, INC.

Firm/Company

P.O. BOX 2038

Address

IDAHO SPRINGS, CO 80452

City/State and Zip Code

mcalderson@eikoncg.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TERI STAPLETON

720

386-3108

at (_____) _____

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

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TALLAHASSEE, FLORIDA
16 JUL 29 AM 8:00

**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. Name of the limited liability company: Eikon Consulting Group, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
1405 W. CHAPMAN DRIVE,
SANGER, TX 76266

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
1405 W. CHAPMAN DRIVE,
SANGER, TX 76266

3. 12/13/2013 Date of filing/registration in Florida

4. M13000007921 Document number

5. (a) WORLEY, SCOTT K, AIA
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
1160 WISPER RUN CT
LUTZ, FL 33558-5184

(b) Unisearch, Inc.
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
155 Office Plaza Drive
Tallahassee FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent 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 the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member JEFFREY ISBELL, MANAGER
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 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.

By: Unisearch, Inc.
Signature of Registered Agent

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 JUL 29 AM 8:00