## M14000005607

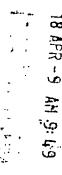
(Requestor's Name)								
(Address)								
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PICK-UP WAIT MAIL								
(Business Entity Name)								
· _								
(Document Number)								
Certified Copies Certificates of Status								
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## STATEMENT 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. 1	Name of the limited liability company: BJS	CONSULTING,L	LC-FL							
2. (a	a) 21201 E. 34th Street S		(b)							
`	Principal office address of limited liability of (Note: MUST BE STREET ADDRE			Mailing address of limi (Note: MAY BE PO						
	Independence, MO 64057									
	08/05/2014		M14000	005607						
3.	Date of filing/registration in Flori	ida 4.		Document numbe	r					
5. (a	a) NRAI Services, Inc									
	Registered Agent and Registered Office shown on t	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:								
	1200 South Pine Island Road									
	Registered Office Address (MUST BE FLORIE	DA STREET ADDRI	<u> </u>	_						
	Displation			<del></del>						
	Plantation	, FL <u>333</u>	324	<del></del>						
(b	Corporation Service Company				,					
( .,	Enter name of NEW Registered Agent and/or NEW	W Registered Office	address:	<del></del>	* 1 00					
					APR					
	1201 Hays Street				R -					
	NEW Registered Office Address:		-		9					
					A					
					<u></u>					
	Tallahassee	, FL 323	:n1		. e.					
	Tamariacooc	, FL			•					
the cl agent was/v	e limited liability company is not organized un hange or changes are made, the Florida street will be identical. Or, in the case of a Florid were authorized by an affirmative vote of the rticles of organization or the operating agrees	t address of the re la limited liability members of the l	egistered office company, it limited liabil	ce and the business of is hereby confirmed ity company or as ot	office of the registered that the change(s)					
	/s/ Brett Simpson		rett Simpson	, Member/Manager						
Sign	nature of a member or authorized representative of a me	ember		Printed or typed name	of signee					
provi the o to me	reby accept the appointment as registered ag isions of all statutes relative to the proper an bligations of my position as registered agent erely reflect a change in the registered office ited in writing of this change.	ent and agree to ad complete perfo as provided for i address, I hereby	act in this ca rmance of my n Chapter 60 v confirm thu	pacity. I further agr eduties, and I am fa 35, F.S. Or, if this di t the limited liability	ee to comply with the miliar with and accept ocument is being filed company has been					
Signa	Nurs of Registered Agent C	DV	A m : 14 C	anan Anat Mu. D						
Signa	nture of Registered Agent Corporation Service C	Lompany BY:	Ami M. Ca	isper, Asst. Vice Pi	resident					

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

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1.	Na	me of the limited liability company: BJS CONSULTI	NG,LLC	-FL		<del></del>		
2.	(a)	21201 E. 34th Street S	_ (b	)				
ν/		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	-		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		Independence, MO 64057	_					
		08/05/2014		M140000	05607	· ; 6		
3.		Date of filing/registration in Florida	4.		Document number	RPR	·	
5.	(a)	NRAI Services, Inc					٠	
		Registered Agent and Registered Office shown on the records of the	::	三	:			
		1200 South Pine Island Road				· · · · · ·		
(b <u>)</u>		Registered Office Address (MUST BE FLORIDA STREET A.	DDRESS	1	•	9.49		
		Plantation , FL_	33324					
	(b)	Corporation Service Company  Enter name of NEW Registered Agent and/or NEW Registered (  1201 Hays Street  NEW Registered Office Address:	Office add	iress:				
		Tallahassee , FL	32301					
the age	cha ent w s/we	mited liability company is not organized under the lawinge or changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited liable.	the regis bility co f the lim	tered office mpany, it is ited liabilit	e and the business of s hereby confirmed y company or as of	office of the re that the chang	gistered ge(s)	
	1	s/ Brett Simpson	Bret	t Simpson,	Member/Manager			
_	ignat	ure of a member or authorized representative of a member			Printed or typed name	of signee	· · · · · · · · · · · · · · · · · · ·	
pre the to	ovisi obl mere	by accept the appointment as registered agent and agreeins of all statutes relative to the proper and complete propersions of my position as registered agent as provided by reflect a change in the registered office address, I have the property of this change.	ee to act performa I for in C ereby co	in this cap ance of my Chapter 603 onfirm that	acity. I further agr duties, and I am fai i, F.S. Or, if this do the limited liability	ree to comply miliar with an ocument is bei company has	with the d accept ng filed been	
Si	gnatu	re of Registered Agent Corporation Service Company	BY: A	mi M. Cas	per, Asst. Vice Pr	resident		



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: April 5, 2018

Order#: 143039-003

Re: BJS CONSULTING LLC

Enclosed please find:

XX \_\_\_ Change of Registered Agent and Office.

XX Check in the amount of \$25 .

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:

Wilmington, DE 19808

Attn: Ami Casper c/o Corporation Service Company 251 Little Falls Drive

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.

QUCA. XCOA