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(Re	equestor's Name)			
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(Ac	ldress)			
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	■ WAIT	MAIL		
(Business Entity Name)				
(BC	isiness Entity Nai	ne)		
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer			
Special Instructions to Filing Officer:				
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Office Use Only



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CSC - WILMINGTON * 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: June 24, 2020

Order#: 300129-058

Re: CONSUMERS ADVOCATE GROUP, LLC

Enclosed please find:

Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

Issue Proof of Filing. XX___

Please return evidence to the following: XX

Attn: Erika Zavala Daza

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

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

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	time of the limited liability company:	S ADVOC	ATE, LLC	
2. (a)	18062 Viking Way NW		(b) 18062 V	iking Way NW
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Poulsbo, WA 98370		Poulsbo,	WA 98370
	07/13/2015		M1500000	05657
3.	Date of filing/registration in Florida	4.	-	Document number
5. (a)	C T CORPORATION SYSTEM			
· (-)	Registered Agent and Registered Office shown on the records 1200 SOUTH PINE ISLAND ROAD Registered Office Address (MUST BE FLORIDA STREE			
	PLANTATION	FL_33324		FIL 2020 JUN 26 SECRETA? TALLAHI
(b)			_	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registe</u>	red Office a	iddress:	in in the contract of the co
	Corporation Service Company			
	NEW Registered Office Address:			- ' !=\ \
	1201 Hays Street		_	_
	Tallahassee	FL_32301		_
change agent was/w the art	imited liability company is not organized under the or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the transfer of a member of a	the registed liability of the limited	red office ar company, it mited liabili I liability cor I Cilmi, Auth	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany. Orized Person Printed or typed name of signee
provis the ob to mer notifie	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provi ely reflect a change in the registered office address, d in writing of this change.	agree to a ete perfori ided for in I hereby	ct in this cap nance of my Chapter 60, confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
	Drace C-Kubly ire of Registered Agent			
	rre of Registered Agent ` ice E. Kirby, Asst. Vice President of CSC			
	Division of Cornerations & D (Day 63	27 Tollaha	reas F1 3731.1

FILING FEE: \$25.00