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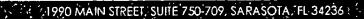
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UNISEARCH, INC.



8/25/2021

SECRETARY OF STATE OF FLORIDA DIVISION OF CORPORATIONS THE CENTRE OF TALLAHASSEE 2415 NORTH MONROE SUITE 810 TALLHASSEE, FL 32303

RE: Unisearch Change of Address

To Whom it May Concern:

Enclosed please find the applications to change the registered agent address on behalf of Unisearch, Inc. for entities that have appointed Unisearch as agent. (More applications will be forwarded in a separate package for the remaining entities). Also enclosed is check # 1043 for \$3,760. Should you have any questions, please contact me at the below number.

Thank you,

Joelle Churik

Unisearch, Inc.

1990 Main Street, Suite 750-709

Sarasota, FL 34236

888-617-4478

joelle.churik@unisearch.com

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A SERVICE OF THE PROPERTY OF T

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.

a)	2460 PASEO VERDE PKWY Suite 145		(b) 2460 PAS	SEO VERDE PKWY Suite 145
ц,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	HENDERSON, NV 89074	_	HENDER	SON, NV 89074
	08/07/2015	_	M15000006	5248
	Date of filing/registration in Florida	4.		Document number
(a)	UNISEARCH, INC.			_
-,	Registered Agent and Registered Office shown on the records of the	ne Flori	da Dept. of Sta	e:
	155 OFFICE PLAZA DRIVE			_
	Registered Office Address (MUST BE FLORIDA STREET A	<u>DDRE.</u>	<u>SS)</u>	
	TALLAHASSEE , FL	32301		_
(b)	UNISEARCH, INC.			20217
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> (Office :	address:	AUG 25
	1990 MAIN STREET, SUITE 750-709			, and the second of the second
	NEW Registered Office Address:			
	SARASOTA , FL	34236		– ter
ige it v	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	egiste pility of the li	ered office an company, it i mited liabilit	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided i
nat	ture of a member or authorized representative of a member			Printed or typed name of signee
rel	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I have	e to a perfori	ct in this cap	acity. I further agree to comply with a duties, and I am familiar with and acc

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

Signature of Registered Agent