(Re	questor's Name)	
(Ad	dress)	·
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
ified Copies	_ Certificates	of Status
ecial Instructions to	Filing Officer:	
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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:	02/03/2021	
	Jennifer Bialowas	<u></u>
Reference #	1322652	<u></u>
	RIGHTPOINT	CONSULTING, LLC
	es of Incorporation/Authorization	
☐ Amer	ndment	
✓ Chan	nge of Agent	
Reins	statement	
Conv	version	
☐ Merg	er	
☐ Disso	olution/Withdrawal	
☐ Fictiti	ous Name	
Other	r	· · · · · · · · · · · · · · · · · · ·
Authorized A	Amount: 25.00	
Signature: _	4	

NY, NY 10016 D: +1.212.947.7200 P: 800.221.0102 F: 800.944.6607

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.

Nam	Name of the limited liability company:		RIGHTPOINT CONSULTING, LLC		
(a)		(b)		
` -	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	· · · · · · · · · · · · · · · · · · ·	Mailing address of limited liability com (Note: MAY BE POST OFFICE BO)	
_	29 N WACKER DRIVE 4TH FLOOR	_	29 1	N WACKER DRIVE 4TH FLOOR	
_	CHICAGO, IL 60606	_		CHICAGO, IL 60606	
	08/03/2016			M16000006185	
_	Date of filing/registration in Florida	4,		Document number	•
(a)	C T CORPORATION SYSTEM	1			
R	egistered Agent and Registered Office shown on the records of t	he Floric	la Dept. of Sta	nte:	
R	Registered Office Address	<u>DDRES</u>	<u>(S)</u>	_	
	1200 SOUTH PINE ISLAND RO	AD			
_	PLANTATION . FL.	;	33324	_	
(b)	COGENCY GLOBAL INC.			20	
	nter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:		
	115 North Calhoun Street, Suite 4	ļ			b 3
<u>N</u>	VEW Registered Office Address:			AMIO: 46	آ
***	Tallahassee		32301	TE LE	
-	Tallanassee FL		32301	-	
chang nt wil s/were	ited liability company is not organized under the law ge or changes are made, the Florida street address of I be identical. Or, in the case of a Florida limited lia authorized by an affirmative vote of the members of es of organization or the operating agreement of the law.	the reg bility c f the lir	istered offic ompany, it nited liabili	ce and the business office of the re is hereby confirmed that the chan ity company or as otherwise provi	egistere ge(s) ded in sember of ser of the
ignature	e of a member or authorized representative of a member	-		Printed or typed name of signee	
vision ohlige nerely	accept the appointment as registered agent and agrass of all statutes relative to the proper and complete attions of my position as registered agent as provided reflect a change in the registered office address. I have a change of this change.	e to ac perforn l for in ereby c	et in this cap nance of my Chapter 60, confirm that	pacity. I further agree to comply aduties, and I am familiar with an 15. F.S. Or, if this document is be, the limited liability company has	with the nd accepting filed wheen
Mature (of Registered Agent				