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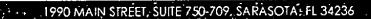
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## UNISEARCH, INC.





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,

oelle Churik

Unisearch, Inc.

1990 Main Street, Suite 750-709

Sarasofa, FL 34236

888-617-4478

joelle.churik@unisearch.com

## 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)	23901 Calabasas RoadSuite 2010	(b) 23901 Calabasas RoadSuite 2010	
· · ·	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Calabasas, CA 91302	Calabasas, CA 91302	
	08/25/2016	M16000006869	
	Date of filing/registration in Florida	4. Document number	
a)	UNISEARCH, INC.		
<i>a)</i>	Registered Agent and Registered Office shown on the records of t  155 OFFICE PLAZA DRIVE	the Florida Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRESS)	
	TALLAHASEE, FL	L 32301	
(b)	UNISEARCH, INC.		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		
	1990 MAIN STREET, SUITE 750-709		
	NEW Registered Office Address:		
	SARASOTA , FL	L 34236	
ge t w we	or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia	ws of the State of Florida, it is hereby confirmed that after e registered office and the business office of the registered liability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in a limited liability company.	
nat	ture of a member or authorized representative of a member	Printed or typed name of signee	
reb isto bli	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I h	ree to act in this capacity. I further agree to comply with to performance of my duties, and I am familiar with and acc and for in Chapter 605, F.S. Or, if this document is being fil hereby confirm that the limited liability company has been	

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

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