M14000007787

(Requestor's Name)	
(Address)	60032160
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	12/18/180161
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer;	
24,9	1/28 (a

Office Use Only



8 -001 **675.00

COVER LETTER

TO: Registration Section

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Divi	sion of Corporations					
CUDIFOT.	TIME SOLUTIONS LLC Name of Limited Liability Company					
SUBJECT:						
Dear Sir or N	Madam:					
The enclosed	d Registered Agent/Registered Off	ice Change and fo	ee(s) are submitted for filing.			
Please return	all correspondence concerning th	is matter to the fo	ollowing:			
JC Castell	anos					
	Name of Person		_			
Unisearch	, Inc.					
	Firm/Company		_			
25909 Pal	a, Suite 180					
	Address		_			
Mission Vi	iejo, CA 92691					
	City/State and Zip Code		_			
E-mail	address: (to be used for future ann	ual report notific	ation)			
For further in	nformation concerning this matter,	please call:				
JC Castell	anos	800	359-4228			
	Name of Person	ar (Area Code & Daytime Telephone Number			
Regi Divi Clift 2661	SEET/COURIER ADDRESS: Istration Section sion of Corporations on Building Executive Center Circle phassee, Florida 32301	Regi Divi P.O.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Encl	losed is a check for the following	amount:				
2 1 \$2	25 Filing Fee	☐ \$55	Filing Fee & Certified Copy			
INHS18 (2/14	1)					

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.

			_	
I. N	ame of the limited liability company: TIME SOLUT	IONS I	LC	
2. (a)		(t	»)	
_	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ``		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	3000 C STREET, STE 301		3000 C	STREET, STE 301
	ANCHORAGE, AK 99503	_	ANCHO	PRAGE, AK 99503
	9/29/2016		M16000	007787
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Registered Agent and Registered Office shown on the records of			_
		the Florid	a Dept. of Stat	e:
	NRAI SERVICES, INC			_
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			20 Se
	1200 South Pine Island Road			Mar. 119
	Plantation FL	33324		2019 JAN 24
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dross:	
	and a second sec	CHILL III	<u>uit 44</u> .	9: 3:
	Unisearch, Inc.			37 TE
	NEW Registered Office Address:	_		_
	155 Office Plaza Drive		 	_
	Tallahassee . FL	32301		
signal Signal I here provise the obtention mer	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited like the ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the member of a member of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.	the reginability confirmated Kringer to account of the limited	stered office ompany, it in tited liability is liability con s Nicholas	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in impany. Printed or typed name of signee to comply with the duties and Lam familiar with and accept

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

Jose Castellanos, Assistant Secretary