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LLC REGISTERED AGENT CHANGE MXE CONSULTING LLC

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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.

L N	ame of the limited liability company:	LLC		
2. (a)	1301 MCKINNEY ST, SUITE 1100	(b)	1301 MCKINNEY ST, SUITE 1100	
2. (4)	Principal office address of limited fiability company: (Note: MUST BE STREET ADDRESS)	_ (",_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	HOUSTON, TX 77010		HOUSTON, TX 77010	
		<u> </u>		
	5/8/2018	MI	8000004458	
3.	Date of filing/registration in Florida	4.	Decument number	
5. (a)	Registered Agents Inc			
	Registered Agent and Registered Office shown on the records of t	pt. of State:		
	7901 4th St N Ste 300			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	St. Petersburg , Ft.	33702	PH 4: 50	
(b)	C T Corporation System		7 50 S	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office addires	2 :	
	NEW Registered Office Address:			
	1200 South Pine Island Road			
	Plantation, FL	33324	_ 	
the cha agent was/w -एक्स	imited 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 lia- ere authorized by an affirmative vote of the members of interest of organization or the operating agreement of the	the register ability comp of the limited	red office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in	
- DORIZON	stars (Pa member or authorized representative of a member	12.20	Printed or typed name of signee	
I here provis the ob to mer notifie By:	hy accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I have a change in the registered office address, I have a complete a change. C T Corporation System	perjormand d jor in Cha hwreby conf	re of my duries, and ram fuminar with and accept upter 605, F.S. Or, if this document is being filed irm that the limited liability company has been	
Signati	ire of Registered Agent CHANTALLE RUFEN-B	BLANCHE	ITE, ASSISTANT SECRETARY	

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