M190000004535

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
(GRYState/Zip/i Holle II)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
J. HORNE						
FEB 1 3 2025						
LED 1.0 FOTO						

Office Use Only



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2025 FEB 12 AM II: 11

RECEIVED

CSC - Tallahassee CSC 1201 Hays Street Tallahassee, FL 32301-2607

850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations

From: Shauna Godbolt - Shauna.Godbolt@cscglobal.com

Ext: x61563 Date: 02/12/25 Order #: 1781262-1

Re: Incisive Consultants LLC Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$25 - FL State Account Number: I2000000195

Please take the following action:

File on a routine basis
Issue proof of filing
Return evidence to the following:
ATTN: Shauna Godbolt
c/o Corporation Service Company
251 Little Falls Drive
Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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	lame of the limited liability company: INCISIVE CONS	UL I Ai	N I	SLLC		
2. (a)	13725 METCALE AVE. STE #296 Overland Park. KS 66223		(b	13725 MET	TCALF AVE. STE #296 Overland Park, KS 66223	
(=)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	05/07/2019	_		M19000004	04535	
3.	Date of filing/registration in Florida	4.			Document number	
5. (a	INCORP SERVICES, INC.					
()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 3458 LAKESHORE DRIVE				te:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				_	
					202	
	TALLAHASSEE	32312	?		FILE 2025 FEB 12	
	TALLAHASSEE	71			FILED	
(b)					, , , , , , , , , , , , , , , , , , ,	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:					
	Corporation Service Company			_ 12		
	NEW Registered Office Address:				•	
	1201 Hays Street				_	
	Tallahassee FL	32301			_	
chang agent was/w	limited liability company is not organized under the law- ge or changes are made, the Florida street address of the r will be identical. Or, in the case of a Florida limited liab were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the li	egiste oility o the li	re cor mi	d office and upany, it is ted liability	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in	
/S/ Christopher Blackerby				Christopher Blackerby, Authorized Person		
Sign	ature of a member or authorized representative of a member				Printed or typed name of signee	
provis the ol to me	eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete poligations of my position as registered agent as provided rely reflect a change in the registered office address, I have a writing of this change.	e to a erfori for in reby	ct na C co	in this cape nce of my c hapter 605 nfirm that i	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	
Signat	Mrs. CTVO					