

AB

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CORE Insights Group, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PAUL DAVIS

Name of Person

CORE Insights Group

Firm/Company

2350 FRUITVILLE RD, STE. 101

Address

SARASOTA, FL 34237

City/State and Zip Code

AccountingTeam@coreinsightsgroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ross Kellman

Name of Person

at (704) 975-4780

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

PAID \$35 previously

See letter

Check # 1022

7/12/18

**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. Name of the limited liability company: CORE Insights Group

2. (a) 2350 FRUITVILLE RD, STE 101

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

SARASOTA, FL 34237

(b) 2350 FRUITVILLE RD STE 101

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

SARASOTA, FL 34237

3. 7/22/2021

Date of filing/registration in Florida

4. M21000009415

Document number

5. (a) KRAMER, ~~ARON~~ AARON

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

6710 PROFESSIONAL PARKWAY N STE 201B
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

SARASOTA, FL 34240

(b) PAUL DAVIS

Enter name of NEW Registered Agent and/or NEW Registered Office address:

2350 FRUITVILLE ROAD

NEW Registered Office Address:

STE 101

SARASOTA, FL 34237

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

Ross A. Killman
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 26, 2023

ROSS A. KELLMAN
14316 REESE BLVD B-137
HUNTERSVILLE, NC 20878

SUBJECT: CORE INSIGHTS GROUP LLC
Ref. Number: M21000009415

We have received your document for CORE INSIGHTS GROUP LLC and your check(s) totaling ~~\$35.00~~. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION, but your entity is a STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 523A00019619