M22 00000 1425

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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FEB 15 2023

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195								
REFERENCE : 497528 7995074								
REFERENCE: 497528 7995074 AUTHORIZATION:								
COST LIMIT : \$'25'.00								
ORDER DATE : February 14, 2023								
ORDER TIME : 1:52 PM								
ORDER NO. : 497528-005								
CUSTOMER NO: 7995074								
CHANGE OF AGENT								
NAME: U. S. FORENSIC LLC								
FORCED DBA: U.S. FORENSIC FLORIDA, LLC								
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:								
CERTIFIED COPY								
XX PLAIN STAMPED COPY								
CONTACT PERSON: Eyliena Baker								
EXAMINER'S INITIALS:								

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. Na	ame of the limited liability company: U.S. FORENS	SIC FLOR	IDA, I	LC				
2. (a)								
2. ()	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)		·/	Mailing address of (Note: MAY I		•		
	3201 RIDGELAKE DRIVE		3201 RIDGELAKE DRIVE METAIRIE, LA 70002					
	METAIRIE, LA 70002							
	01/29/2022		M22000001425					
3.	Date of filing/registration in Florida	4.		Document nu	mber			
5. (a)								
(a)	Registered Agent and Registered Office shown on the records HOLDEN, MICHAEL	of the Floric	la Dep	t. of State:				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					<u>~</u>		
	159 SABAL PALM DRIVE				$\mathcal{L}_{i,m}$	0231		
	LONGWOOD	32779			-	2023 F.B. !	4 () 1 ()	
							,	
(b)	Enter name of NEW Registered Agent and/or NEW Register					===		
	Einter name of NEW Registered Agent and/or NEW Register	<u>red Office a</u>	<u>ddress</u>	i.	<u>.</u>	PH I2: 32	المعيدة "	
	Corporation Service Company				***	32		
	NEW Registered Office Address:							
	1201 Hays Street		_					
	Tallahassee, I	FL_32301						
change agent v was/we	imited liability company is not organized under the lor changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited at the real throughout an affirmative vote of the members cles of organization or the operating agreement of the	he register liability c s of the lir	ed of ompa nited	fice and the business ny, it is hereby confi- liability company or	office of rmed that	the reg	gistered ange(s)	
/s/ Gary Bell			Gary Bell, Manager					
_	ture of a member or authorized representative of a member			Printed or typec		C		
provisi the obl to mere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and completigations of my position as registered agent as providily reflect a change in the registered office address, if in writing of this change.	gree to ac te perform ted for in I hereby c	t in th tance Chap onfir	nis capacity. I further of my duties, and I a ter 605, F.S. Or, if th m that the limited lian	r agree to m familio iis docun bility con	o comp. ir with nent is a npany l	ly with the and accept being filed aas been	
	re of Registered Agent E. Kirby, Asst. Vice President on behalf of Corpora	ition Servi	ice C	ompany				

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