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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

JAN 27 LULL

Email Address:\_\_\_

## REGISTERED AGENT CHANGE BANDWIDTH CONSULTING, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

## **"COVER LETTER**

TO: Amendment Section Division of Corporations

15129570210

Bandwidth Consulting, Inc. Name of Corporation F11000001984 DOCUMENT NUMBER The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Zachary Ysais Name of Contact Person Registered Agent Solutions, Inc. Firm/Company 1701 Directors Blvd, Suite 300 Address Austin, Texas 78744 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Zachary Ysais Name of Contact Person

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

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

Street Address:

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

CR2E045 (04/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chu	provisions of sections 607.0502, 61 inge is submitted for a corporation or or to change its registered office or r	organized under the law.	s of the State of <u>C</u>	alifomia
1. The name of	the corporation: Bandwidth Co	nsulting, Inc.		
2. The principal	office address: 2021 MCKINNE	EY AVENUE SUIT	E 1100	
DALLAS,	TX 75201			<del></del>
_	nddress (if different):			
4. Date of incor	poration/qualification: 5/9/2011	Document no	<sub>umber:</sub> F11000	001984
	d street address of the current register rtment of State: (If resigned, enter re		office on file with	ı the
	MILLER, T Steven			
	807 WEST MORSE BLVD,	SUITE 101		,
	WINTER PARK	FL	32789	
6. The name and (if changed):	d street address of the new registered Registered Agent Solu		/or registered offi	ce :
	155 Office Plaza Dr.	Suite A		
	Tallahassee	P.O. Box NOT acceptable FL 32301		
The street address changed will	ess of its registered office and the s	street address of the bus	iness office of its	registered agent,
Such change w authorized by t	as authorized by resolution duly ad he board, or the corporation has be	lopted by its board of di en notified in writing of	rectors or by an of the change.	fficer so
151 Sherri R		Sherri Russel	•	Authorized Person
I hereby accept I further agree of my duties, at	the appointment as registered age to comply with the provisions of al and I am familiar with and accept th ing filed merely to reflect a change s been notified in writing of this ch	ent and agree to act in ti I statutes relative to the e obligation of my posit in the revistered office	proper and comp ion as revistered	olete performance avent. Or. if this
Hod	renziaNt	01/26/2021		
Sig	grature of Registered Agent		Date	
If signing on be	chalf of an entity:			
	, Assistant Secretary			
1	Typed or Printed Name * * * FILIN	G FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)