13000/65943

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(=====================================						
(Document Number)						
Certified Copies Certificates of Status						
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2022 JUL 11 AM 9: 30

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A. BUTLER JUN 12 2022 CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195						
REFERENCE : 794993 8176261						
AUTHORIZATION :						
COST LIMIT : 5 25.00						
·						
ORDER DATE : July 8, 2022						
ORDER TIME : 9:01 AM						
ORDER NO. : 794993-025						
CUSTOMER NO: 8176261						
CHANGE OF AGENT						
NAME: TELAGEN LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Alexxis Weiland EXT#						

EXAMINER:

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: TELAGEN LLC			
7 (a)		Ü	o)	
(·-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(~/ 	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2075 CENTRE POINTE BLVD Ste 103		2075 CE	NTRE POINTE BLVD Ste 103
	TALLAHASSEE, FL 32308-7835	_	TALLAH	ASSEE, FL 32308-7835
	11/26/2013		L1300016	65943
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
J. (u)	Registered Agent and Registered Office shown on the records of HILL, DAVID A	the Florida	a Dept. of Sta	te:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	2075 CENTRE POINTE BLVD Ste 103			
	TALLAHASSEE, FL	32308-7	7835	2022 SEC TA
				TALLAHA
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	ANCY OF STANKS SEE
	and the or the state of the sta	Omice ad		SSEC A
	Corporation Service Company			
	NEW Registered Office Address:			9:3
	1201 Hays Street			
	Tallahassee, FL	32301		_
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registere ability co of the lim	ed office an empany, it i sited liabilit	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
1	tt Miller	Bre	tt Miller, Au	thorized Person
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi the obl to mere	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. I have the property of this change.	ee to act performe I for in C iereby co	in this cap ance of my Thapter 602 onfirm that	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
	re of Registered Agent E. Kirby, Asst. Vice President on behalf of Corporation	on Servic	re Compan	v
	Division of Corporations P.O. I			•

FILING FEE: \$25.00