Millicon

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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CORPORATION SERVICE COMPANY 1201 Havs Street

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

	ACCOUNT NO). :	120000000	195	
	REFERENC	CE :	422467	8290202	
	AUTHORIZATIO	: NC	Louis	Coron)	
	COST LIM	T :	\$ 65.00		
ORDER DATE :	January 31, 20)23			
ORDER TIME :	8:26 AM				
ORDER NO. :	422467-005				
CUSTOMER NO:	8290202				
		. -			
CHANGE OF AGENT					
NAME:	UTEGRATION,	LLC			
PLEASE RETURN	THE FOLLOWING	AS PR	OOF OF FIL	ING:	
CERTIF PLAIN					
CONTACT PERSON	: Alexxis Wei	land			

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. N	ame of the limited liability company: UTEGRATION	I, LLC					
2. (a)		(t))				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address o (Note: MAY B	f limited lia	ibility co	mpany:
	1415 LOUISIANA ST STE 2375		1415 LOU	JISIANA ST ST	TE 2375		
	HOUSTON, TX 77002		HOUSTO	N, TX 77002			
	10/27/2022		M2200001	6519			
3.	Date of filing/registration in Florida	4.		Document nui	nber		
5. (a)							
J. (a)	Registered Agent and Registered Office shown on the records o	of the Florida	Dept. of State	- e:			
	C T CORPORATION SYSTEM						
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS		_		۲.	
	1200 SOUTH PINE ISLAND ROAD				,	[2]	
	PLANTATION . F	33324		_	:	7973 EED -	٠
		-		_	•	÷	
(b)	Enter name of NEW Registered Agent and/or NEW Registere			_	٠,٠	MH 9:	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	ed Office ad	<u>dress</u> :				المجعدا
	Corporation Service Company			_	im	ن ت	
	NEW Registered Office Address:		•				
	1201 Hays Street			_			
	Tallahassee	32301					
change agent was/w the art /S/ C	limited liability company is not organized under the la e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited later authorized by an affirmative vote of the members icles of organization or the operating agreement of the arrie Ryan	e registere iability co of the lim e limited l	ed office and mpany, it is ited liability iability com	d the business of the business of the confinity of a pany. The company of a pany. The company of the company.	office of med that as otherw	the reg the cha ise pro	istered ange(s)
-	ature of a member or authorized representative of a member			Printed or typed			
provisi the ob- to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. It is writing of this change.	ed for in C hereby co	ince of my a hapter 605 infirm that t	acity. I further haies, and I an , F.S. Or, if th the limited liab ASST. VICE I	n familia is docum ility com	r with a ent is b pany he	v with the and accept seing filed as been