

BC4006606469

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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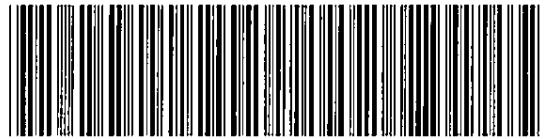
(Business Entity Name)

(Document Number)

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JB

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 883945 7458513

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : January 8, 2025

ORDER TIME : 2:18 PM

ORDER NO. : 883945-293

CUSTOMER NO: 7458513

CHANGE OF AGENT

NAME: DIGITAL REALTY TRUST, L.P.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt

EXAMINER'S INITIALS: _____

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. DIGITAL REALTY TRUST, L.P.
Name of Limited Partnership or Limited Liability Limited Partnership
2. 10/27/2004 3. B04000000469
Date of filing/registration in Florida Florida document number

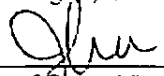
4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

NRAI SERVICES, INC 1200
Name
SOUTH PINE ISLAND ROAD
Address
PLANTATION, FL 33324
City, State and Zip

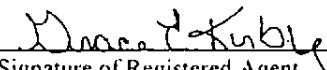
5. The name and Florida street address of the new registered agent and/or office:

Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box not acceptable)
Tallahassee FL 32301
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

 JEANNIE LEE, EXECUTIVE VICE PRESIDENT ON BEHALF
Signature of General Partner OF DIGITAL REALTY TRUST, INC. GENERAL PARTNER

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.

 GRACE E. KIRBY, ASST. VICE PRESIDENT
Signature of Registered Agent

Filing Fee: \$35.00 883945
Certified Copy (optional): \$52.50

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