

B14 000000205

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

JAN 10 10 11 AM

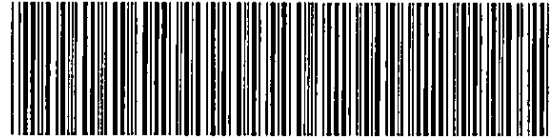
JAN 10 10 11 AM

FILED

2024 JAN 10 PM 12:12

SECRETARY OF STATE

Office Use Only



900419585719

RECEIVED

2024 JAN 10 AM 11:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. UNITED CABLE TELEVISION OF OAKLAND COUNTY, LTD.

Name of Limited Partnership or Limited Liability Limited Partnership

2. 09/09/2014

Date of filing/registration in Florida

3. B14000000205

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:

C T Corporation System

Name

1200 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.

Jill E. Cilmi
Signature of General Partner

Jill Cilmi, Vice President on behalf of

United Of Oakland, 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.

Ami M. Casper
Signature of Registered Agent

Corporation Service Company

Ami M. Casper, Asst. Vice President

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

FILED
2024 JAN 10 PM 12:12
SECRETARY OF STATE
FLORIDA DEPARTMENT OF STATE