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SHOWNED



CORPORATION SERVICE COMPANY

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

ACCOUNT NO	э. :	12000000	0195					
REFERENC	CE :	883945	7458513					
AUTHORIZATIO	: NC		Charles man					
COST LIM	IT :	\$ 35.0						
ODDED DATE . January 9 20								
ORDER DATE : January 8, 202	23							
ORDER TIME : 2:15 PM								
ORDER NO. : 883945-285								
CUSTOMER NO: 7458513								
								
CHANGE OF AGENT								
NAME: DIGITAL REA	ALTY T	RUST, INC						
PLEASE RETURN THE FOLLOWING	AS PR	OOF OF FI	LING:					
CERTIFIED COPY								
XX PLAIN STAMPED COPY								
CONTACT PERSON: Shauna Godi	oolt							
	EXAMI	NER'S INI	TIALS:					

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

statement of cha	provisions of sections mge is submitted for a	a corporatio <mark>n organiz</mark>	ed under the law	s of the Sta	nte of MA	RYLA	
	r to change its registe		-,	i, in the Sta	te of Flori	ida.	
	the corporation: DIGIT						
2. The principal	office address: 5707 S	SW PKWY BLDG 1,	STE 275 AUST	IN, TX 787	35		
3. The mailing a	ddress (if different): _						
4. Date of incorp	poration/qualification:	10/27/2004	Document n	umber: F0	4000006	136	
	I street address of the cament of State: (If resi			d office on	file with th	he	
	NRAI SERVICES, I	INC.					
	1200 SOUTH PINE	ISLAND ROAD					
	PLANTATION		FL	33324	· · · · · ·) [
6. The name and (if changed):	street address of the	new registered agent	(if changed) and	l /or registe	To office	1 HAL GO	المستوبي أن م مجوده ه منسو :
	Corporation Service	e Company			16.	9	٠
	1201 Hays Street				SEES	13.	الرعبة الرعبة
		P.O. Box	NOT acceptable		<u> </u>	: 2	
	Tallahassee		FL	32301	<u> </u>	-4	
The street addre	ess of its registered of be identical.	ffice and the street ac	ddress of the bus	siness offic	e of its re	gistere	ed agent,
Such change wa authorized by th	as authorized by resol ne board, or the corpo	lution duly adopted l oration has been noti	by its board of d fied in writing o	irectors or I the chang	by an offi ge.	cer so	
/S/ JEANN	IE LEE		JEANNIE LEE, I	EVP			
Signatur	re of an officer or director		Printe	ed or typed nam	ne and title		
I further agree to of my duties, an document is beil corporation has	the appointment as r to comply with the prod I am familiar with a ng filed merely to ref s been notified in writ n Service Compar	rovisions of all statut and accept the oblig flect a change in the ting of this change.	agree to act in t es relative to the ation of my posi registered office	his capacit e proper an tion as reg e address, l	y. id comple istered ag 'hereby co	te perf tent. (onfirm	formance Or, if this (that the
<u>Βν: Χλώς</u>	nature of Registered Agent		01/16/2025	D.			
_	, -			Date			
If signing on be	half of an entity:						
	BY, ASST. VICE PRE	ESIDENT					
13	yped or Printed Name	* * * 1/11 13/0 222	. ezenn + + +				
		* * * FILING FEE	JJJ.UU " " "				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)
883945