

F19 000003087

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6380

From:
Account Name : COMPUTERSHARE
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Phone : (561)694-8107
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6/15/24 10:10:39

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

2024 FEB -8 10:10:39

**REGISTERED AGENT CHANGE
CONSTELLATION DATA SOLUTIONS INC.**

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of DE in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CONSTELLATION DATA SOLUTIONS INC.
 2. The principal office address: 11350 McCormick Rd, EP3 Ste 200 Hunt Valley, MD 21031-1002

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 07/02/2019 Document number: F19000003087

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

COGENCY GLOBAL INC.

115 NORTH CALHOUN STREET SUITE 4 TALLAHASSEE, FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

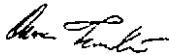
United Agent Group Inc.

801 US Highway 1 North Palm Beach FL 33408

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

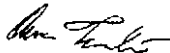


Signature of an officer or director

Ariana Turoski, Attorney-in-fact

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

02/03/2024

Date

If signing on behalf of an entity:

By: Ariana Turoski, Special Secretary

Typed or Printed Name

*** FILING FEE: \$35.00 ***

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

2024-02-05 11:06:49