

LDL000119992

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C.V.
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**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. Name of the limited liability company: Network Sensing Technologies, LLC

2. (a) 2004 Lewis Turner Blvd, Ste # E (b) 2004 Lewis Turner Blvd, Ste # E

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Fort Walton Beach, FL 32547

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

Fort Walton Beach, FL 32547

December 26, 2006

L06000119992

3. Date of filing/registration in Florida

4. Document number

5. (a) Michael P. Chaloupka

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Network Sensing Technologies, LLC

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

1184 Eglin Parkway

Shalimar, FL

(b) Michael P. Chaloupka

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Network Sensing Technologies, LLC

NEW Registered Office Address:

2004 Lewis Turner Blvd, Suite #E

Fort Walton Beach, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Michael P. Chaloupka
Signature of a member or authorized representative of a member

Michael P. Chaloupka
Printed or typed name of signee

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Michael P. Chaloupka
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

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