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PICK-UP	☐ WAIT	MAIL.				
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Certified Copies	Certificates	s of Status				
Special Instructions to I	Filina Officer:					
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Office Use Only



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SECKETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: NDTHOST, LLC
Name of Limited Liability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Alex Simser Name of Person
Satcom Direct Inc. Firm/Company
1050 Satcom Lane Address
Melhourne FL 32940 City/State and Zip Code
documents@incorp.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alex Simser at (321) 525-4617 Name of Person Area Code & Daytime Telephone Number 5
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
☑ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy
INHS18 (2/14)

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

۱.	Na	me of the limited liability company: NDTHOST,	LLC							
		Principal office address of limited liability company:		(b))	Aailing address o	<u></u>	Litter	 	
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				nailing address of (Note: MAY B)		•		
		1901 Highway A1A			1901 Higi	hway A1A				
	Indian Harbour Beach, FL 32937			Indian Harbour Beach, FL 32937						
1		01/24/2011		-	L11000009					
3.		Date of filing/registration in Florida	•	4.		Document nu	mber			
5.	(a)	KANCILIA, JOHN R								
		Registered Agent and Registered Office shown on the record	s of the f	lorida	Dept. of State	; ;				
		1795 West Nasa Boulevard								
		Registered Office Address (MUST BE FLORIDA STRE	<u>ET ADD</u>	RESS	ļ					
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		Melbourne	FL	32	2901			2016 1		
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((b)	InCorp Services, Inc.					か <u>た</u> 公元	12	5	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ered Off	ce ado	lress:					
							LURETARY OF STATE LEAHASSEE, FLORID	\(\sigma \)		
		17888 67th Court North				•		6 h 🛈		
		NEW Registered Office Address:					1	Φ		
					.470	•				
		Loxahatchee	, FL	33	3470	-				
the ager was the	cha nt v s/we arti igna	imited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the member cles of organization or the operating agreement of the operating agreement of the operation of a member or authorized representative of a member by accept the appointment as registered agent and	s of the d liabil ers of th the lim	regis ity co le lim lited l	tered office mpany, it is ited liability iability com	e and the busing the shereby confined the shereby c	ness office rmed that as otherwin	of the the charise prov	registered nge(s) rided in	
the to n	visi obl nere ifie c	by accept the appointment as registered agent and ons of all statutes relative to the proper and compligations of my position as registered agent as provely reflect a change in the registered office address in writing of his change. Sera Braylage in the control on behalf of incomplete the control of the				quiles, and I a , F.S. Or, if th the limited liab	m jamiilai iis docum bility com	r with a ent is be pany ha	na accept eing filed is been	
Sign	natu	re of Registered Agent	•							