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Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
	Office Use On	

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01/03/19--01023--022 **25.00



C. GOLDEN JAN 1.2 2019



CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

TO: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscqlobal.com

Date: December 31, 2018

Order#: 563665/005

Re: FRONTLINE TECHNOLOGY SOLUTIONS LLC

Enclosed please find:

 \underline{XX} Change of Registered Agent and Office. \underline{XX} Check in the amount of \$25.

Please take the following action:

<u>XX</u> File in your office on a routine basis.
<u>XX</u> Issue Proof of Filing.
<u>XX</u> Return Regular Mail in the enclosed envelope.

Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.

? (a)	631 South Orlando Avenue, Suite 200	(b)	
2. (a)	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)	(0)	Mailing address of limited liability company; (Note: MAY BE POST OFFICE BOX)
	Winter Park, FL 32789		
	06/06/2012	L1	2000075456
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Al Lalonde		
	Registered Agent and Registered Office shown on the records of	of the Florida Dep	t. of State:
	631 South Orlando Avenue, Suite 200		
	Registered Office Address (MUST BE FLORIDA STREET	TADDRESS)	··· >
	Winter Park, F	L <u>32789</u>	
(1.)	Corporation Service Company		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office address	
	1201 Hays Street		
	NEW Registered Office Address:		
	Tallahassee, F	L_32301	
the cha agent w was/we	mited liability company is not organized under the lange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the tree of th	of the registere liability compa of the limited	d office and the business office of the registered any, it is hereby confirmed that the change(s) liability company or as otherwise provided in
/s/ A	l LaLonde	Al LaLo	nde, Member
Signat	ure of a member or authorized representative of a member	- <u>-</u>	Printed or typed name of signee
I herel provisi the obli to mere	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complet igations of my position as registered agent as provid ily reflect a change in the registered office address. I in writing of this change. A	gree to act in t le performance led for in Chap I hereby confi	his capacity. I further agree to comply with the e of my duties, and I am familiar with and accept oter 605, F.S. Or, if this document is being filed rm that the limited liability company has been

Signature of Registered Agent Corporation Service Company BY: Ami M. Casper, Asst. Vice President

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