

L130000 96039

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

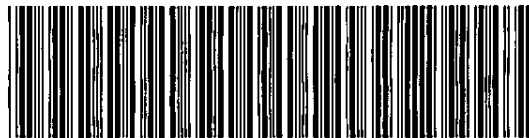
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF COURT

APPROVED
AND
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15 JAN 16 PM 1:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

gc 1/20

ACCOUNT NO. : I20000000195

REFERENCE : 463105 4300426

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : January 15, 2015

ORDER TIME : 10:18 AM

ORDER NO. : 463105-010

CUSTOMER NO: 4300426

CHANGE OF AGENT

NAME: DIRECT CONNECT MERCHANT
SERVICES, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: _____

**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: DIRECT CONNECT MERCHANT SERVICES, LLC

2. (a) _____ Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i> <u>3901 CENTERVIEW DRIVE, SUITE W</u> <u>CHANTILLY, VA 20151</u>	(b) _____ Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i> <u>3901 CENTERVIEW DRIVE, SUITE W</u> <u>CHANTILLY, VA 20151</u>
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3. <u>JULY 5, 2013</u> Date of filing/registration in Florida	4. <u>L 13000096039</u> Document number
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5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

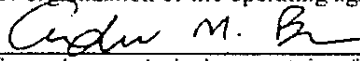
CARLOS GAVIDIA
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
212 SPYGLASS LANE
JUPITER, FL 33477

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

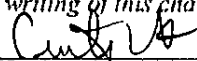
CORPORATION SERVICE COMPANY
NEW Registered Office Address:
1201 HAYS STREET
TALLAHASSEE, FL 32301

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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.

 _____ Signature of a member or authorized representative of a member	Andrew M. Brown _____ Printed or typed name of signer
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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.

 _____ Signature of Registered Agent	BY: <u>Courtney Williams</u> <u>Asst. Vice President</u>
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