Florida Department of State

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number (813)436-5206

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

Email Address:_

LLC REGISTERED AGENT CHANGE CHEMDEV SOLUTIONS, LLC

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1/10/2025 08:56:01 PST To: 18506176383 Page: 2/2 Fax: 8134365206

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.

I. N	Name of the limited liability company: <u>CHEMDEV SQL</u>	LUTIONS, LL	.C		_			
2. (a	7901 4th St N STE 300	7901 4th St N STE 300 (b) 7901 4th St N STE 300						
, -	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)					
	St. Petersburg FL 33702 US		St. Petersbu	urg FL 33702 L	JS			
	02/04/2014	L	1400001998	38				
3.	Date of filing/registration in Florida	4.	1	Document nu	ımber			
5. (ε) Reid, John Gregory							
	Registered Agent and Registered Office shown on the records of	of the Florida D	Dept. of State:	:				
	11849 OSPREY POINT CIRCLE							
	Registered Office Address (MUST BE FLORIDA STREET	[ADDRESS]						
	WELLINGTON . F	EL_33449						
(b) Northwest Registered Agent LLC					202		
(U	Enter name of NEW Registered Agent and/or NEW Registered Office address:						Ŀ	
					1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m	Z	m_ = = = = = = = = = = = = = = = = = = =	
	7901 4th St N					0		
	NEW Registered Office Address:					2025 JAH 10 PM	APPROVEL AND FILED	
	STE 300				11(2)		C	
						~		
	St. Petersburg , F	FL 33702			•	σ		
	Ot. Foreigning	1,						
If the	limited liability company is not organized under the la	aws of the S	tate of Flor	rida, it is here	by confir	med t	hat after	
agent	nange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited by	liability con	ipany, it is	hereby confi-	rmed that	the ch	nange(s)	
was/v	vere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the limit	ed liability	company or	as otherw	ise pr	ovided in	
		ic minicu na	wanty comp	pany.				
Sign	ature of a member or authorized representative of a member	<u>Nat Sn</u>	n <u>ith</u>	Printed or typed	name of sig	gnce		
I her provi the oi to me notifi	eby accept the appointment as registered agent and assions of all statutes relative to the proper and complet oligations of my position as registered agent as provid rely reflect a change in the registered office address. I gd in writing of this change.	gree to act in te performar ted for in Ch I hereby con	n this cana	city. I furthe	r avree to	- com	oly with the and accept being filed has been	
/ / wh	rayibi Netillan - Assistant	Secretary						
Signa	ture of Registered Agent							