14000029943

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICKLUP WAIT	MAIL							
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status	;							
Special Instructions to Filing Officer								
	!							

Office Use Only



700364496537

04/21/21--01001--023 **75.00

121 APR 20 PM 4: 21

APR 2 1 2021

,		ORPORATE -ACCESS,	When you need ACCESS to the world
		INC.	236 East 6th Avenue, Tallahassee, Florida 32303 32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666
İ			WALK IN
		PICK	UP: 4/20 Glinda
		CERTIFIED COPY	
	xx	РНОТОСОРУ	
		CUS	
	xx	FILING	RA change
1.		NEXT CHAPTER 2014, LLC (CORPORATE NAME AND DOCUM	
2.		(CORPORATE NAME AND DOCUM	1ENT #)
3.		(CORPORATE NAME AND DOCUM	MENT #)
4.		(CORPORATE NAME AND DOCUM	4ENT #)
5.			
6.		(CORPORATE NAME AND DOCUM	IEN! #)
		(CORPORATE NAME AND DOCUM	IENT #)

SPECIAL

INSTRUCTIONS:

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)			(h))			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0,) Mailing address (<u>Note: MAY</u>)	of limited li	ability co	этрапу:
	30 TEMPLE STREET, SUITE 400			30 TEMPLE STREET, S		. , 1 (1.	<u>110.1</u>)
	NASHUA, NH 03060			NASHUA, NH 03060			
	02/20/2014		L	_14000029943			
a)	Date of filing/registration in Florida	4.	-	Document nu	mber		<u> </u>
/	Registered Agent and Registered Office shown on the records of COGENCY GLOBAL INC.	the Flor	ida I	Dept. of State:			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 115 North Calhoun St., Suite 4					nya Çay	
	Tallahassee, FL	32301	-		· 		
)) ₋	Enter name of NEW Registered Agent and/or NEW Registered CCS Global Solutions, Inc.	ress:	LAT OF STA	29 MH 10: 2			
	NEW Registered Office Address: 155 Office Plaza Drive			 -	F	26	
	Tallahassee, FL	32301					
linge (wi wer ticl	nited liability company is not organized under the law or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited lial e authorized by an affirmative vote of the members of les of organization or the operating agreement of the l	oility c the lir	om nite lial	pany, it is hereby confirm	office of t	he regi:	stered
	re of a member or authorized representative of a member			Printed or typed:	name of sign	nce	
ah.	accept the appointment as registered agent and agre ns of all statutes relative to the proper and complete p ations of my position as registered agent as provided y reflect a change in the registered office address. I have in writing of this change.	e to ac	t in	this capacity. I further	agree to c	comply	with th