L15000027829

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





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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscglobal.com

Date: February 6, 2018

Order#: 054702/024

Re: KE AKI TECHNOLOGIES, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Grace Kirby

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.

Name of the limited liability company: KE'AKI TECHNOLOGIES, LLC						
2 (a)	12565 Research Parkway, Suite 300	(b)				
Σ. (α)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	Orlando FL 32826					
	12/29/2006	L15000	0027829			
3.	Date of filing/registration in Florida	4.	Document number			
5. (a)	Patricia Coble		-			
	Registered Agent and Registered Office shown on the records of the	he Florida Dept. of St	ate:			
	12565 Research Parkway, Suite 300		<u></u>			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
			_			
	Orlando , FL	32826	_			
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered (Office address:	98 F			
	1201 Hays Street		EB:			
	NEW Registered Office Address:		TARY OF CO			
			P P P P P P P P P P P P P P P P P P P			
			STA STA			
	Tallahassee , FL	32301				
the ch agent was/w	simited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	the registered offi bility company, it f the limited liabil	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in			
	Jel & Gome	Jill Cilmi, Auth	norized Person			
I here provis the ob to her notifie	the accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided after the complete of the proper and complete ligations of my position as registered agent as provided after the change in the registered office address, I had inwriting of this change	performance of m I for in Chapter 60 ereby confirm tha	Printed or typed name of signee spacity. I further agree to comply with the values, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been at the limited President.			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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2.	(a)	12565 Research Parkway, Suite 300	_ (b)	
	<u>-</u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Orlando FL 32826	-		
,		12/29/2006	-	L150000	
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	Patricia Coble			_
		Registered Agent and Registered Office shown on the records of the	e Florida	Dept. of Stat	te:
		12565 Research Parkway, Suite 300			
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)	2	
					_
		Orlando , FL_	32826		SECRE 18 FEB
	(b)	Corporation Service Company			OF F
	(0)	Enter name of NEW Registered Agent and/or NEW Registered O	ffice add	lress:	- G≺!-
					PA .
		1201 Hays Street			A A A A A A A A A A A A A A A A A A A
		NEW Registered Office Address:			
		Tallahassee , FL	32301		_
the age wa the	cha ent w s/we arti	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liab treauthorized by an affirmative vote of the members of class of organization or the operating agreement of the line.	ne regis vility con the limi mited li	tered offic mpany, it i ited liabilit ability cor	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in apany. Drized Person
	_	ure of a member or authorized representative of a member			Printed or typed name of signee
pro the to i	obli nere ijved	te accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete per gations of my position as registered agent as provided in reflect a change in the registered office address, I he is in writing of this change in the conference of Registered Agent Corporation Service Company	erforma for in C reby co	ince of my hapter 60: infirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been rby, Asst. Vice President