

L16000218269

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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18 MAR 13 AM 9:42

RECEIVED  
2018 MAR 13 AM 10:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. LEGGETT  
MAR 16 2018

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 114108 7842511

AUTHORIZATION :

*[Handwritten Signature]*

COST LIMIT : \$25.00

ORDER DATE : March 13, 2018

ORDER TIME : 9:45 AM

ORDER NO. : 114108-005

CUSTOMER NO: 7842511

CHANGE OF AGENT

NAME: REDCAP TECHNOLOGIES, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

           CERTIFIED COPY  
XX            PLAIN STAMPED COPY

CONTACT PERSON: Roxanne Turner -- EXT#

EXAMINER: \_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 14, 2018

CORPORATION SERVICE COMPANY

**RESUBMIT**  
Please give original  
submission date as file date.

SUBJECT: REDCAP TECHNOLOGIES, LLC  
Ref. Number: L16000218269

We have received your document for REDCAP TECHNOLOGIES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The information in number 5(a) must be completed.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Judy A Leggett  
Regulatory Specialist II  
Registration Section

Letter Number: 818A00005114

2018 MAR 15 AM 10:50  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RedCap Technologies, LLC

\_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maura Toler

\_\_\_\_\_  
Name of Person

Solera Holdings, Inc.

\_\_\_\_\_  
Firm/Company

1301 Solana Blvd., Bldg. 2, Ste. 2100

\_\_\_\_\_  
Address

Westlake, TX 76262

\_\_\_\_\_  
City/State and Zip Code

maura.toler@solera.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maura Toler

at ( 817 ) 961-2082

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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: RedCap Technologies, LLC

2. (a) 1301 Solana Blvd, #2100, Westlake, TX 76262 (b) Same  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. 12/02/2016 4. L16000218269  
Date of filing/registration in Florida Document number

5. (a) David Zwick  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

330 HIMMARSHEE STREET #210  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

FORT LAUDERDALE, FL 33312

(b) Corporation Service Company  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

1201 Hays Street  
NEW Registered Office Address:

Tallahassee, FL 32301

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.

David Babin Signature of a member or authorized representative of a member  
David Babin, Assistant Secretary Printed or typed name of signee

*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.*

Emily Croft Signature of Registered Agent/Corporation Service Company BY: Emily Croft  
Asst. Vice President

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