Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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LLC REGISTERED AGENT CHANGE STEEL WARRIOR TECHNOLOGY LLC

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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

. Na	me of the limited liability company: STEEL WAR	RIOR	TECHNOLOG	YLLC	
. (a)	8419 Sunstate Street		(b) 8419 Sunstate Street Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
` '	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				
	Tampa, FL 33634	<u></u> .	Tampa, FL	FL 33634	
	06/27/2019	_	L190001608	89	
	Date of filing/registration in Florida	- 4.	Doe	cument number	
. (a)	CF Registered Agent, Inc.				
(b) .	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 100 S. Ashley Drive				
	Registered Office Address (MUST BE FLORIDA STREET) Suite 400	ADDRES	33)	2020 JAN SECHALLI AND	
	Tampa	33602	2	A T	
	F & L Corp.	- "		-6 -	
	Enter name of NEW Registered Agent and/or NEW Registered	i Ome a	uuren.		
	One Independent Drive			1 To 1	
	NEW Registered Office Address:		,		
	Suite 1300				
	Jacksonville, FI	32202	2		
ie cha gent v as/we	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	f the reg ability of of the lii	istered office and company, it is he mited liability co	d the business office of the register reby confirmed that the change(s) impany or as otherwise provided in	
		Kε	vin Collins		
Signa	ture of a member or authorized representative of a member		Pri	nted or typed name of signee	
rovisi 1e ohl 1 mere	by accept the appointment as registered agent and agi ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in yriting of this change.	ree to ac perform d for in hereby	et in this capacit nance of my duti Chapter 605, F. confirm that the	y. I further agree to comply with the es, and I am jamiliar with and account is being file limited liability company has been	

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

Randolph J. Wolfe