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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

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LLC REGISTERED AGENT CHANGE TRAJAN TECHNOLOGY SERVICES 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

L N	ame of the limited liability company:TRAJAN TECHN	OLOGY SERVICE	SLLC
2. (a)		(b)	
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	03/20/20	L20000	086708
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	HIDALGO, YESENIA		
J. (u)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of	State.
	251 VALENCIA AVENUE		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	CORAL GABLES	33134	
(b)	Northwest Registered Agent LLC		20731:AY 30
	Enter name of NEW Registered Agent and/or NEW Registered	d Office address:	
	7901 4th St N		
	NEW Registered Office Address:		<u> </u>
	STE 300		
		·······	
	St. Petersburg , FI	33702	
the chiagent was/w the art Sign: There provis the obto mer sotifig	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members icles of organization or the operating agreement of the studies of a member or authorized representative of a member of accept the appointment as registered agent and against of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address. It is in writing of this change.	f the registered of iability company of the limited liability Nat Smith	office and the business office of the registered it is hereby confirmed that the change(s) bility company or as otherwise provided in company. Printed or typed name of signee capacity. I further agree to comply with the
~ /V~	Taylor Newman - Assistant S	Secretary	

Signature of Registered Agent