7/30/2021

lorida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone

: (307)200-2803

Fax Number

: (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one small in annual report mailings. Enter only one email address please.

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| | | | |

LLC REGISTERED AGENT CHANGE TECH ANALYTICS LLC

| Certificate of Status | 0 |
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AUG 0 2 2021

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Help

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. Na | ame of the limited liability company: TECH AN | ALY | TICS | LLC | _ | | | |
|---|--|--|---|--|--------------------|----------------------|--|--|
| 2. (a) | 13407 CALIMENTO ST. | (b | (b) 13407 CALIMENTO ST. | | | | | |
| - (-) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | Mailing address of limited liability company: (Note: MAY BE POST OFFICE ROX) | | | | | | |
| | VENICE, FL 34293 | - | VENICE | , FL 34293 | | | | |
| | 08/13/20 | | L20000247171 | | | | | |
| 3. | Date of filing/registration in Florida | 4. | | Document number | | | | |
| 5. (a) | UNITED STATES CORPORATION AGENTS | , INC. | | | | | | |
| | Registered Agent and Registered Office shown on the records of the 5575 S. SEMORAN BLVD. | - e: | | | | | | |
| | Registered Office Address (MUST BE FLORIDA STREET AI | - | | | | | | |
| | 36 | | | _ | 0.1 | <u> </u> | | |
| | Orlando32822 | | | _ | - 13 | SEC | | |
| (b) | Registered Agents Inc. | - | JUL 30 | K OF C | | | | |
| | The rame of NEW Registered Agent and/or NEW Registered C | | ₽ H : : | ORPOR/ | | | | |
| | NEW Registered Office Address: | | | - | 5 | ATE | | |
| | STE 300 | - | | XS. | | | | |
| | St. Petersburg | 33702 | • | _ | | | | |
| the cha agent v was/wa | imited liability company is not organized under the lawsinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the liabers. | he regis oility co the lim | stered office ompany, it is ited liabilit | e and the business office o s hereby confirmed that th y company or as otherwise | f the re e chan | gistered ge(s) | | |
| <u>K:1</u> | uy tark | Rile | y Park | D | | | | |
| I here, provisi the obl to mer | ture of a member or authorized representative of a member by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address. I had in writing of this change. Bill Havre - Assistant | erform for in C ereby co | ance of my Chapter 605 onfirm that | duties, änd I am familiar v 5, F.SOr, if this documen | omply with an | d accept ng filed | | |

Signature of Registered Agent