

120 000387958

(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:

Office Use Only



800363044448

04/02/21--01022--023 \*\*25.00

SECTION 17  
TALLAHASSEE, FL

2021 APR -2 AM 11:43

FILED

17 BRUCE  
MAY 23 2021

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Cybertek MSSP, 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:

Aaron Bibbee

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

Wargo & French, LLP

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

201 S. Biscayne Boulevard Suite 1000

\_\_\_\_\_  
Address

Miami, Florida 33131

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

abibbee@wargofrench.com

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

For further information concerning this matter, please call:

Aaron Bibbee

305

777-6077

at ( )

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

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

Mailing Address:

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

Street Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

IN11518 (2/14)

RECEIVED  
TALLAHASSEE, FL  
2021 APR -2 AM 11:43  
FBI

2

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: Cybertek MSSP, LLC
2. (a) 3 WEST GARDEN STREET  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
SUITE 217  
PENSACOLA, FL 32502  
12/11/2020
- (b) 10886 CRABAPPLE RD.  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
SUITE 100  
ROSWELL, GA 30075  
L20000387958
3. 12/11/2020 Date of filing/registration in Florida
4. L20000387958 Document number
5. (a) ALINA M SINGER  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
201 S. BISCAYNE BOULEVARD  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
SUITE 1000  
MIAMI, FL 33131
- (b) Wargo & French, LLP  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
201 S. BISCAYNE BOULEVARD  
NEW Registered Office Address:  
SUITE 1000  
MIAMI, FL 33131

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.

Jeffrey Venza  
Signature of a member or authorized representative of a member

Jeffrey Venza  
Printed or typed name of signer

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.

Jeffrey Venza  
Signature of Registered Agent

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