

L220000361785

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

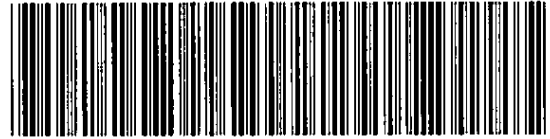
(Business Entity Name)

(Document Number)

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2024 OCT 29 AM 8:54

SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED

2024 OCT 29 PM 3:24

SECRETARY OF STATE
TALLAHASSEE, FL

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

ACCOUNT NO. : I20000000195

REFERENCE : 730520 7539619

AUTHORIZATION :

COST LIMIT : \$ 25.0

ORDER DATE : October 29, 2024

ORDER TIME : 2:26 PM

ORDER NO. : 730520-005

CUSTOMER NO: 7539619

CHANGE OF AGENT

NAME: VOICECENTRAL LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt -- EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: L22000361785

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:

Name of Person

VOICECENTRAL LLC

Firm/Company

3333 S Congress Avenue STE 200

Address

Delray Beach FL 33445

City/State and Zip Code

sosteam@csilongwood.com

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

For further information concerning this matter, please call:

Chris Dangelo

at (561) 665-9659

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

**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: VOICECENTRAL LLC
2. (a) 3333 S Congress Avenue STE 200
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
Delray Beach FL 33445
- (b) 3333 S Congress Avenue STE 200
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
Delray Beach FL 33445
3. 08/17/2022 Date of filing/registration in Florida
4. L22000361785 Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
GREENSPOON MARDER LLP
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
2255 GLADES ROAD SUITE 400-E
BOCA RATON, FL 33431
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
Corporation Service Company
NEW Registered Office Address:
1201 Hays Street
Tallahassee, FL 32301

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SECRETARY OF STATE
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.

Chris Dangelo
Signature of a member or authorized representative of a member

Chris Dangelo

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.

Shauna Godbolt

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

FILING FEE: \$25.00