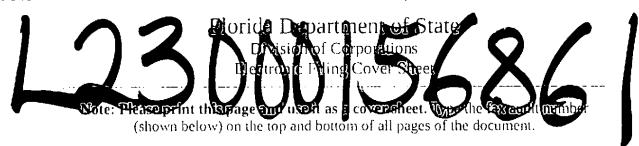
Division of Corporations



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H240000607193ABC\$

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 : (307)200-2803

Fax Number : (813)436-5206

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LLC REGISTERED AGENT CHANGE DVANCE TECHNOLOGY SYSTEMS AND SUPPORT LLC

Certificate of Status	0
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M. SOLOMON FEB 13 2024

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To 18506176383

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

(a)		(b)	
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: **CNote: MAY BE POST OFFICE BOX**
	03/28/23	L23000	0156861
	Date of filing/registration in Florida	4.	Document number
(a)	UNITED STATES CORPORATION AGENTS, INC.		
	Registered Agent and Registered Office shown on the records of		
	Registered Office Address (MUST BE FLORIDA STREET) 476 RIVERSIDE AVE.	ADDRESS)	2024 FEB 13
	JACKSONVILLE FI	32202	. .
(b)	Registered Agents Inc Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>		PH 3: 34
	7901 4th St N		
	NEW Registered Office Address:		-
	STE 300		
	St. Petersburg	33702 	
e cha ent v is/we e arti	imited liability company is not organized under the la inge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited b are authorized by an affirmative vote of the members are of organization or the operating agreement of the	of the registered of iability company of the limited his	office and the business office of the register y, it is hereby confirmed that the change(s) ability company or as otherwise provided in
	tare of a member of authorized representative of a member	Robin Jones	
សាន	ture of a member or authorized representative of a member		Printed or typed name of signee

to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

David Roberts - Assistant Secretary

Signature of Registered Agent