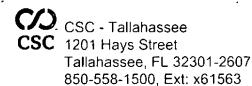
232 492

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to f	Filing Officer:	

Office Use Only



000441817580



To: Department Of State, Division Of Corporations

From: Shauna Godbolt - Shauna.Godbolt@cscglobal.com

Ext: x61563 Date: 01/21/25 Order #: 1757167-4

Re: FEDERAL CONTRACTS LLC Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$25.0 - FL State Account Number: I20000000195

Well mars

Please take the following action:

File on a routine basis Issue proof of filing Return evidence to the following: ATTN: Shauna Godbolt c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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.

I. Na	me of the limited liability company:	NTRACTS LL	C
2. (a)	12918 N. Nebraska Avenue	(b)	
. . (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Tampa, FL 33612		
	06/06/2024	L24	000232492
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	The Corporation Trust Company		
5. (a)	Registered Agent and Registered Office shown on the records of	of the Florida Dep	
	1200 S. Pine Island Road, #250		25
	Registered Office Address (MUST BE FLORIDA STREET	FADDRESS)	
	Plantation , I	33324 L	25 JAH 21 FAT
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company		
	NEW Registered Office Address:		
	1201 Hays Street		
	Tallahassee, F	L_32301	
change agent v was/we	imited liability company is not organized under the later or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited later authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ic registered of liability compa of the limited	ffice and the business office of the registered my, it is hereby confirmed that the change(s) Itability company or as otherwise provided in
	John Delia	John De	elia, Authorized Person
_	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi the obl to mere		e performance ed for in Chap Thereby confir Corporation (his capacity. I further agree to comply with the of my duties, and I am Jamiliar with and accept wer 605, F.S. Or, if this document is being filed on that the limited liability company has been Service Company