(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
, , , ,					
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RECEIVED



To: Department Of State, Division Of Corporations

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

Ext: x61563 Date: 10/04/24 Order #: 1639400-1 Re: Digic US, LLC

Processing Method: Routine



TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$35.0 - FL State Account Number: I20000000195

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.

2. (a)	2200 N. Ocean Boulevard	(h	2200 N	N. Ocean Boulevard
z. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) CU4	(t	CU4	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	·-			auderdale, FL 33305
	Fort Lauderdale, FL 33305			
	September 20, 2024		L24000	410985
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Jeffrey M. Oshinsky, P.A.			
<i>J.</i> (a)	Registered Agent and Registered Office shown on the records	of the Florida	Dept, of S	state:
	2200 N. Ocean Boulevard			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			. 2
	CU4			17A
	Fort Lauderdale	FL_33305		2024 OCT -7 2024 OCT -7
(b)				
ν-,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office ad	dress:	PH 10: 3h
	Corporation Service Company			<u></u>
	NEW Registered Office Address:			
	1201 Hays Street			<u> </u>
	Tallahassee	32301 FL		
change agent v was/we	imited liability company is not organized under the or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member cles of organization or the operating agreement of the control of t	he registero liability co s of the lim te limited l	ed office mpany, i ited liabi iability c	and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.
/s/ Alex Rab Signature of a member or authorized representative of a member		——————————————————————————————————————	Alex Rab, Manager Printed or typed name of signee	
-	•	aree to act	in this a	-
/s/ A Signat		Alex	k Rab, Ma	anager Printed or typed name of signee anacity - I further agree to complete

Signature of Registered Agent
Lindsey M. Lockard, Asst. Vice President on behalf of Corporation Service Company