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Account Name : C T CORPORATION SYSTEM

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LLC REGISTERED AGENT CHANGE INTELLIGENT CONSERVATION SYSTEMS, LLC

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From: Daylen Platt

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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. N	ame of the limited liability company: Intelligent Conser	vation 5	Systems, LLC			
2. (a)			(b)			
•	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	3100 Camp Road		3100 Camp Road			
	Oviedo, FL 32765		Oviedo, Fl. 32765			
	September 13, 2004		1.24000524912			
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	Shawn D. Bush					
<i>5.</i> (a)	Registered Agent and Registered Office shown on the records of t	2025				
	Registered Office Address (MUST BE FLORIDA STREET A	FILE 2025 JAN 29 STOPT 15-77 SALLARIASSE				
	Oviedo, FL					
(b)	C T Corporation System Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	9: 04 LORBER				
	NEW Registered Office Address:	NEW Registered Office Address:				
	1200 South Pine Island Road					
	Plantation, FL_	33324				
change agent v was/we the arti	imited liability company is not organized under the laws or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the law. Kipp	registe bility c f the lin imited	red office and ompany, it is nited liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in		
	ture of a member or authorized representative of a member			Printed or typed name of signee		
I here provisi the obl to mere notified	hy accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address. I h I in writing of this change.	e to ac perforn for in crehy c	t in this capa lance of my d Chapter 605, confirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been		
	el, Associate Director, Customer Success					
	re of Registered Agent					