Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000360995 3)))

5

To: Division of Corporations Fax Number : (850)617-6383 Account Name : UNITED AGENT GROUP INC. Account Number : I20160000086 Phone : (561)508-5033
Fax Number : (561)694-1639 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address:

LLC REGISTERED AGENT CHANGE ZEBRA TECHNOLOGIES INTERNATIONAL, LLC

September 1	
Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

SEP 2 8 2021 S. PRATHER

Electronic Filing Menu Corporate Filing Menu

Help

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)	3 Overlook Point, Lincolnshire, IL 60069	ው`	(b) 3 Overlook Point, Lincolnshire, IL 60069		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limite (Note: MAY BE POS		
	04/08/2002	_	M02000000897		
3.	Date of filing/registration in Florida	- _{4.} -	Document number		
5. (a)	C T CORPORATION SYSTEM				
J. (u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 1200 SOUTH PINE ISLAND ROAD Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	PLANTATION , FI	33324		2021 SEP 27 SECRETARY FALLAHASSER	
(h)	United Agent Group Inc.			EP Z	7
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office add	iress:		<u> </u>
	801 US Highway 1			AM 10: UF STAI • FLORI	ED
	NEW Registered Office Address:			56 IDA	
	North Palm Beach , FI	33408			
change agent v was/w	imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liter authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registere ability co of the lim	d office and the business office mpany, it is hereby confirmed t ited liability company or as oth	of the registered that the change(s)	
		Adia	Myles, Attorney-in-fact		
	sture of a member or authorized representative of a member		Printed or typed name		
I here provisi the obi to mer notifie	by accept the appointment as registered agent and agi ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflectly change in the registered office address, I d'in virting of this change.	ree to act performa d for in C hereby co	in this capacity. I further agre- ince of my duties, and I am fam hapter 605, F.S. Or, if this doc nfirm that the limited liability o	e to comply with the iliar with and accept cument is being filed company has been	
	Adia Myles, Special Secretary				