M02000002247

(Requestor's Name)					
(Address)					
(Address)					
(
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



700409454317

20.3 1-8 PH 12: 35

: II WW 8-NOF 5202

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallbassoo FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	: I2000000195						
REFERENCE	: 799601 4806894						
AUTHORIZATION	Expiral lada						
COST LIMIT	: \$ 25'.00						
ORDER DATE : June 7, 2023	-						
ORDER TIME : 9:22 AM							
ORDER NO. : 799601-010							
CUSTOMER NO: 4806894							
	• • • • •						
CHANGE OF AGENT							
NAME: EI ELECTRONICS LLC							
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY							
CONTACT PERSON: Alexxis Weilar	nd-sorenson						
EXA	AMINER'S INITIALS:						

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	IECT:		
	Name	e of Limit	ed Liability Company
Dear	Sir or Madam:		
The e	nclosed Registered Agent/Registered Offic	ce Change	and fee(s) are submitted for filing.
Please	e return all correspondence concerning this	s matter to	the following:
	Name of Person		
	Firm/Company		
	1 inn/Company		
	Address		
	City/State and Zip Code		
	E-mail address: (to be used for future annu	ial report	notification)
For fu	orther information concerning this matter.	olease cal	l:
	Name of Person	_ at ()
	Mailing Address:		Street Address:
	Registration Section Division of Corporations		Registration Section Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810
	, a a a a a a a a.		Tallahassee, FL 32303
	Enclosed is a check for the following a	ımount:	
	□ \$25 Filing Fee	(☐ \$55 Filing Fee & Certified Copy
	10 (3114)		

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: El Electronics LL	.C			
2. (a)			b)		
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- `	· /	Mailing address of lin	mited liability company: POST OFFICE BON
	40 Waterview Drive		40 Wate	erview Drive	
	Shelton, CT 06484	_	Shelton,	CT 06484	
	8/26/2002		M020000	02242	
3.	Date of filing/registration in Florida	4.	-	Document numb	per
5. (a)	Registered Agent and Registered Office shown on the records of t George Putoczki Registered Office Address 4702 Tobermory Way	34211	<u>s)</u>	ate:	-8 PH 12: 35
	Tallahassee, FL	32301		_	
change agent was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization of the operating agreement of the least of organization of the operating agreement of the law ture of a member or authorized representative of a member by accept the appointment as registered agent and agree of all statutes relative to the proper and complete plays of my position as registered agent as provided by reflect a change in the registered office address. I had in writing of this change.	register bility co f the lin imited Kat we to accepte for in Ce ereby co	ed office arompany, it nited liability conherine A. L. in this car	nd the business off is hereby confirmed ity company or as of impany. Printed or typed nationally active. I further as	ice of the registered ed that the change(s) otherwise provided in me of signee
change agent was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization of the operating agreement of the liability of a member of authorized representative of a member by accept the appointment as registered agent and agreeins of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I he	rs of the register bility co f the lin imited Kat Kat ve to acc verform for in G	ed office arompany, it nited liability conherine A. L. in this car	nd the business off is hereby confirmed ity company or as of impany. Printed or typed nationally active. I further as	ice of the registered ed that the change(s) otherwise provided is me of signee