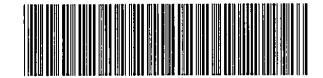
## M0400000274K

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

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19 JUL -3 PH 4: 36

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	07/03/2019	
	Joy Weaver	· <del></del>
Reference	e #:1089670	
Entity Nar	me:NEUTRAL T	ANDEM-FLORIDA, LLC
	icles of Incorporation/Authoriza	ion to Transact Business
_	nendment lange of Agent	
	instatement	
Co	nversion	ئے ۔ نے ج
□ Ме	erger	
☐ Dis	ssolution/Withdrawal	10
☐ Fic	ctitious Name	
Otl	her	
Authorize	d Amount: <b>\$25.00</b>	
Signature		

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH F LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability  $com_e$  submits the following statement in order to change its registered office or registered agent, or both, in the Stat Florida.

NEUTRAL TANDEM-FLORIDA, LLC

1. N	ame of the limited liability company: NEOTF	RAL TANDEN		
2. (a)	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)		N	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	No Change		No Char	nge
				M04000002744
3.	Date of filing/registration in Florida	4.		Document number
5. (a	Corporation Service Company			
(20	Registered Agent and Registered Office shown on the reco	ords of the Florida I	Dept. of State	· •
	1201 Hays Street			
	Registered Office Address (MUST BE FLORIDA ST	REET ADDRESS)		· · · 2
		- ·		
	Tallahassee	, <sub>FL_</sub> 32301-	2525	2019 JUL -3
(b)	COGENCY GLOBAL INC.			· · · · · · · · · · · · · · · · · · ·
(11)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			AH 10:
	115 North Calhoun St., Suite 4			): 10
	NEW Registered Office Address:	<u>-</u>		•
	Tallahassee	<sub>, FL_</sub> 32301_		-
the chagent was/v	limited liability company is not organized under range or changes are made, the Florida street addi will be identical. Or, in the case of a Florida lim were authorized by an affirmative vote of the men ticles of organization or the operating agreement	ress of the regist nited liability con nbers of the limi	ered office npany, it is ted liabilit	c and the business office of the registe s hereby confirmed that the change(s) y company or as otherwise provided i
/s/ Scott Sawyer			Sawyer	
_	nature of a member or authorized representative of a member			Printed or typed name of signee
provi: the of to me	eby accept the appointment as registered agent a sions of all statutes relative to the proper and con bligations of my position as registered agent as pr rely reflect a change in the registered office addr ed in writing of this change.	nntete nertorma	$nce\ or\ mv$ .	anares, ana i ann iamunar wun ana acc
	im Mayville			
Signat	Tim Mayville, Assistant	t Secretary		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 **FILING FEE: \$25.00**