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

Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

		ACCOUNT N	0. :	12000000	0195			
		REFEREN	CE :	590328	8027298			
		AUTHORIZATI	ON :	No.				
		COST LIM		\$ 25.00	man)			
ORDER D	ATE :	April 5, 2022						
ORDER T	'IME :	1:53 PM						
ORDER N	Ю. :	590328-282						
CUSTOME	R NO:	8027298						
<u>CHANGE OF AGENT</u> .								
	NAME :	GPI TECHNO	LOGIES	, LLC				
		THE FOLLOWING	AS PR	OOF OF FI	LING:			
		STAMPED COPY						
CONTACT	PERSON	J: Eyliena Ba						
			EXAMI	NER'S INI	TIALS:			

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.	Na	me of the limited liability company: GPI TECHNOLO	OGIES, I	LL.	.LC
2	(a)	2635 E. Millbrook Road	(h	o)	5008 Airport Road
۷.	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	-7_	Mailing address of limited liability company; (Note: MAY BE POST OFFICE BOX)
		Raleigh, NC 27604	- -	- F -	Roanoke, VA 24012
		01/22/2008	_	№	M08000000327
 3. 5. 	(a)	Date of filing/registration in Florida C T Corporation System	4.		Document number
J. (a	(4)	Registered Agent and Registered Office shown on the records of to 1200 South Pine Island Road	Dept. of State:		
		Registered Office Address (MUST BE FLORIDA STREET A	. ~ ~		
		Plantation, FL_	33324	<u> </u>	2022 APR
	(b)				12
	(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dn	dress:
		Corporation Service Company			.?
		NEW Registered Office Address:			
		1201 Hays Street		_	
		Tallahassee, FL_	32301		
chaga aga wa	ange ent v is/we	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 liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	registere bility co f the lim	ed : omp nite	d office and the business office of the registered mpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in
		ll Cilmi			Cilmi, Authorized Person
_5	Signal	ture of a member or authorized representative of a member			Printed or typed name of signee
pro the to	ovisi obl mere	by accept the appointment as registered agent and agre ons of all statules relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.	performa I for in C ereby co	and ho onf	ince of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed nfirm that the limited liability company has been
_					on Service Company asper, Asst. Vice President