## M1000000 2281

(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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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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ACCOUNT NO. : I2000000195						
REFERENCE : 139485 1 4355598						
AUTHORIZATION :						
COST LIMIT : \$ 25.00						
ORDER DATE: November 20, 2023						
ORDER TIME : 9:10 AM						
ORDER NO. : 139485-048						
CUSTOMER NO: 4355598						
CHANGE OF AGENT						
NAME: COMCAST BROADBAND SECURITY, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY						
XX PLAIN STAMPED COPY						
CONTACT PERSON: Eyliena Baker						
EXAMINER'S INITIALS:						

## 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.

Name of the limited liability company:  COMCAST BROADBAND SECURITY, LLC						
2	(a)	1701 John F. Kennedy Boulevard		(b)		
	(a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y:	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		Philadelphia, PA 19103-2838				
		05/20/2010		M1000	0002281	
3.		Date of filing/registration in Florida		4.	Document number	
5.	(a)	C T Corporation System				
3.	(b)	Registered Agent and Registered Office shown on the record 1200 S. Pine Island Road  Registered Office Address (MUST BE FLORIDA STRE		·	State: 2023 D. r.	
		Plantation	_, Fl3	3324		
(		Enter name of NEW Registered Agent and/or NEW Regist  Corporation Service Company	tered Qff	ice address:	1: 12: 27	
		NEW Registered Office Address:		<del></del> -	<del>.</del>	
		1201 Hays Street				
		Tallahassee	, FL_323	301	<del></del>	
chai agei was	ige o it wi /wer	nited liability company is not organized under the or changes are made, the Florida street address of all be identical. Or, in the case of a Florida limited e authorized by an affirmative vote of the membeles of organization or the operating agreement of	the regi d liabili ers of the	stered office by company, be limited liab	and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in	
					thorized Person	
Si	Printed or typed name of signee					
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.  Corporation Service Company						
Signature of Registered Agent Ami M. Casper, Asst. Vice President						