

M10000002933

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

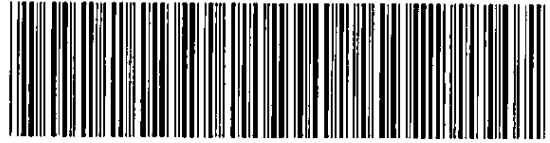
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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RECEIVED
TALLAHASSEE, FLORIDA
2023 NOV 13 PM 12:40

RECEIVED
2023 NOV 13 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R. HUNT
11/13/22

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

ACCOUNT NO. : I20000000195

REFERENCE : 056521 8316519

AUTHORIZATION :

COST LIMIT : \$ 25.0

ORDER DATE : October 9, 2023

ORDER TIME : 1:55 PM

ORDER NO. : 056521-040

CUSTOMER NO: 8316519

2023 NOV 13 PM 12:40
DIVISION OF CORPORATE
STATE

FOREIGN FILINGS

NAME: RSA SECURITY LLC

 CORPORATE
 LIMITED PARTNERSHIP
XX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: _____

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: RSA Security LLC

Enter new principal office address, if applicable:

2 Burlington Woods Dr.

(Principal office address

Suite 201

MUST BE A STREET ADDRESS)

Burlington, MA 01803

Enter new mailing address, if applicable:

2 Burlington Woods Dr.

(Mailing address

Suite 201

MAY BE A POST OFFICE BOX)

Burlington, MA 01803

2. The Florida document number of this limited liability company is: M10000002933

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 06/24/2010

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C.," or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida Street Address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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.

If Changing Registered Agent, Signature of New Registered Agent

2023 NOV 13 PM 12:40
 DIVISION OF CORPORATE
 STATE

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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_____	_____	_____	<input type="checkbox"/> Add
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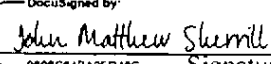
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_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Remove
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9. Attached is a certificate, if required; no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

DocuSigned by:

 0000C64BA0F D48C Signature of the authorized representative

Matt Sherrill

 Typed or printed name of signee

Filing Fee: \$25.00