M 10000003708

6/13/18

FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

12:24 PM

(((H17000193017 2)))

TO: DIVISION OF CORPORATIONS FAX #: (850)922-4000

FROM: C T CORPORATION SYSTEM ACCT#: FCA000000023

CONTACT: KIM LAUGHREY

PHONE: (614)280-3338 FAX #: (954)208-0845

NAME: INFRASAFE, LLC

AUDIT NUMBER..... H17000193017

DOC TYPE.....

CERT. OF STATUS..0 PAGES...... 2
CERT. COPIES.....0 DEL.METHOD.. FAX
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AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

** ENTER 'M' FOR MENU. **

ENTER SELECTION AND CR:

Replacement. original was not wichired

SR 6/13/18

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJI						
	Name of Limited Liability Company					
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Off	ice Change and	d fee(s) are submitted for filing.			
Please	return all correspondence concerning th	is matter to the	e following:			
Tami p	passley					
	Name of Person					
Lownd	es, Drosdick, Doster, Kanotr & Reed P.A.					
	Firm/Company		- 			
215 N.	Eola Drive					
	Address		 -			
Orlando	o, FL 32801					
	City/State and Zip Code					
E	-mail address: (to be used for future ann	ual report noti	fication)			
For fur	ther information concerning this matter,	please call:				
Adam N	Nussbaum	202 at (572-3162			
	Name of Person		Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS:		IAILING ADDRESS:			
	Registration Section		Registration Section Division of Corporations			
	Division of Corporations					
	Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		O. Box 6327 allahassee, Florida 32314			
	Enclosed is a check for the following					
	■ \$25 Filing Fee	O \$	555 Filing Fee & Certified Copy			
INHS18	3 (2/14)					

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: Infrasafe, LLC		
		(1	h)
z. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ '	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	12612 Challenger Parkway Suite 300		12612 Challenger Parkway Suite 300
	Orlando, FL 32826		Orlando, FL 32826
	08/20/2010		M10000003708
	Date of filing/registration in Florida	4.	Document number
. (a)	CORPORATION SERVICE COMPANY		
. (4)	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES.	<u>S1</u>
	1201 HAYS STREET		
	Tallahassee , FL	32301	
	,, r.L	·	
(b)			
(6)	Enter name of NEW Registered Agent and/or NEW Registered	Office at	ldress:
	National Registered Agents, Inc.		
	NEW Registered Office Address:		
	1200 South Pine Island Road		
	Plantation FL	33324	
ie cha gent v as/wa	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	ws of the f the regi ability co of the lin limited	e State of Florida, it is hereby confirmed that after istered office and the business office of the registere ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in
Siena	ture of a member or authorized representative of a member	— KICI	Printed or typed name of signee
here rovisi he obl o merc otified CTC	by accept the appointment as registered agent and agnitions of all standes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I did in writing of this change. Judith Argao Vice President	perform d for in	t in this capacity. I further agree to comply with the nance of my duties, and I am familiar with and accep Chapter 605, F.S. Or, if this document is being file.
ignatu	ere of Registered Application and Assistant Secretary		
	Division of Corporations P.O. 1	Box 632	7● Tallahassee, FL 32314

FILING FEE: \$25.00

INFIS18 (2/14)