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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. 8	lame of the limited liability company: INFRASAFE ,	LLC	
2. (a)	12612 Challenger Parkway, Suite 300 Principal office address of limited liability company:	(b)	Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST OFFICE BOX)
	FL 32826		
	08/20/2010	M10	000003708
3.	Date of filing/registration in Florida	4.	Document number
5. (a	National Registered Agents, Inc.		
	Registered Agent and Registered Office shown on the records of	f the Florida Dept.	
	1200 South Pine Island Road		20
	Registered Office Address	ADDRESS)	SFE TI
	Plantation FI	1. 33324	2019 FEB 14 MII 10: 8
(b)	Corporation Service Company		<u>6</u>
(-,	Enter name of NEW Registered Agent and/or NEW Registered	d Office address:	
	1201 Hays Street		
	NEW Registered Office Address:		
			<u></u>
	Tallahassee , FI	J 32301	
the ch agent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of organization or the operating agreement of the	ws of the State f the registered lability compan of the limited li	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in
·	Xie E agnie	Jill Cilmi,	Authorized Person
Sign	were of a member or authorized representative of a member		Printed or typed name of signee
provis the ob to mei	by accept the appointment as registered agent and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I ad in writing of this change	ree to act in thi e performance of ed for in Chapte hereby confirm	is capacity. I further agree to comply with the of my duties, and I am familiar with and accept or 605, F.S. Or, if this document is being filed a that the limited liability company has been
Signat	ure of Registered Agent Corporation Service Company	BY: Ami M	Casner Asst Vice President

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