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LLC REGISTERED AGENT CHANGE WALL STREET NETWORK SOLUTIONS, LLC

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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.

	140 (17	the limited liability company: WALL STREET		LAGITE					
2. (a	· ——	Principal office address of limited Hability company: (Note: MUST RE STREET ADDRESS)	_	(b) 140 LITTLETON ROAD Mailing address of finalised liability company; Note: MAY BE POST OFFICE BOXO SUITE 310					
	PARS	PARSIPPANY, NJ 07054			Parsippany, ni 07054				
	11/04/2	5011	_	M1100000	5554				
3. 5. (z	CORP	Date of filing/registration in Florida ORATION SERVICE COMPANY	4.		Dozument numb	er			
1	Register	ed Agent and Registered Office shown on the records of	the Flori	da Dept, of Su	dec				
	_	ed Office Actives <u>(MUST BE FLORIDA STREET)</u> HAYS STREET	INDER:	· · · · · · · · · · · · · · · · · · ·	_	No.	14		
(b)	TALL	ahasser,, fl	32301-	2525		32m	<u></u>		
	CTCo	прогаціол Зувієть			-		CT 2		
	<u> Polar</u> sa	and of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	Adress:	_		4 PH	İ	
	NEW R	logistered Office Address;			- 		4:		
	1200	South Pine Ishand Read			_	; ,•	24		
	Plants	tion PL	33324		 -				
the el agent was/y	vere auth	lability company is not organized under the lat changes are made, the Plorida street address of dentical. Or, in the case of a Florida limited in orized by an affirmative vote of the members of organization or the operating agreement of the	the rep ability of the li	dstared officeompany, it mitted liability	ce and the business is hereby confirmative company of as a	office of ed that the	the regi	istered 48)	
<i>-</i> 1 -	26		M	ic St. Pierre	- Authorized Person	-:			
I her provi the oi to me moilfi CTC hye-c		number or enthanized representative of a member of the appointment as registered agent and agrill statutes relative to the proper and complete is of my position as registered agent as provide of a change in the registered office address, I ling of this change.	ee to a perform a for in tereby P. Passide	ct in this con nunce of mi Chapter of confirm tha fare St. Pi	Printed or typed on pacity. I further a pacity. I further a parties, and I am is in F.S. Or, if this a the limited trability is the limited trability.		nply wi In and is being y has 5	ih the accept g filed ean	

Division of Corporationse P.O. Box 6327e Talkehasson, FL 32314 FILING FEE: \$25.00

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