M14000001678

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A. BUTLER NOV 15 2022

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 127428 _ 7665311

AUTHORIZATION : Synchole man

COST LIMIT : \$\frac{1}{25}\dot{0}

ORDER DATE: November 10, 2022

ORDER TIME : 10:05 AM

ORDER NO. : 127428-032

CUSTOMER NO: 7665311

CHANGE OF AGENT

NAME: MANDIANT, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

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.

2. (a)	One Freedon Square	(b) On	e Freedon Square	
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	11951 Freedom Drive 6th Floor	119	51 Freedom Drive 6th Floor	
	Reston, VA 20190	Res	ston, VA 20190	
	03/13/2014	M140	M14000001678	
3.	Date of filing/registration in Florida	<u></u> 4.	Document number	
5. (a)				
υ. (u)	(a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: COGENCY GLOBAL INC. Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 115 North Calhoun Street			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	115 North Calhoun Street			
	Tallahassee	FL_32301	PH II 3	
/L)				
(b)	Enter name of NEW Registered Agent and/or NEW Register	red Office address:	<u> </u>	
	Corporation Service Company			
	NEW Registered Office Address:	•		
	1201 Hays Street			
	Tallahassee	FL		
agent w was/we	imited liability company is not organized under the or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	he registered offi liability compan s of the limited li	ce and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in	
		Svilen I. K	Caraivanov, Authorized Representative	
Signature of a member or authorized representative of a member			Printed or typed name of signee	
the obli- to mere	oy accept the appointment as registered agent and a cons of all statutes relative to the proper and comple igations of my position as registered agent as providive reflect a change in the registered office address. It is writing of this change.	gree to act in this le performance o ded for in Chapte I hereby confirm	s capacity. I further agree to comply with the f mv duties, and I am familiar with and accept r 605, F.S. Or, if this document is being filed that the limited liability company has been	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

Signature of Registered Agent

Grace E. Kirby, Asst. Vice President