(Requestor's Name)						
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CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195							
REFERENCE : 969085 7842511							
AUTHORIZATION Synchole man							
COST LIMIT : \$25.00							
ORDER DATE: August 19, 2021							
ORDER TIME : 2:37 PM							
ORDER NO. : 969085-025							
CUSTOMER NO: 7842511							
<u>CHANGE OF AGENT</u>							
NAME: OMNITRACS, LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY							
XX PLAIN STAMPED COPY							
CONTACT PERSON: Alexxis Weiland							
EXAMINER'S INITIALS:							

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.	Na	me of the limited liability company: OMNITRACS, LL	С			
2. (717 N HARWOOD ST STE 1300	(b	717 N HA	ARWOOD ST STE 1300	
(α,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ · / _ · · · · · · · · · · · · · · · · · · 		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		DALLAS, TX 75201	_	DALLAS,	TX 75201	
		08/05/2014		M1400000	5595	
 3. 5. 	(a)	Date of filing/registration in Florida UNITED AGENT GROUP INC.	4.		Document number	
J. ,	,	Registered Agent and Registered Office shown on the records of the 801 US HIGHWAY 1	e Florida	Dept. of Stat	– e:	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			2021 AUG SECRETA	
		NORTH PALM BEACH , FL	33408		16 25 AHAR	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address: Corporation Service Company			ME 8: 53	
		NEW Registered Office Address:			-	
		1201 Hays Street			_	
		Tallahassee, FL_3	32301		_	
char ager was/	ige it w 'we	mited liability company is not organized under the laws or changes are made, the Florida street address of the re vill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egistere ility cor the limi	d office and npany, it is ited liability	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in	
Jill Cilmi, Author					rized Person	
Signature of a member or authorized representative of a member Printed or typed name of signee						
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.						

Signature of Registered Agent Grace E. Kirby, Asst. Vice President of Corporation Service Company