114000008306

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT	MAIL					
(Business Entity N	ame)					
(Document Number)						
Certified Copies Certificat	es of Status					
Special Instructions to Filing Officer:						

Office Use Only



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03/04/16--01017--017 **25.00

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2016 MAR -L AM 9:5

K. SALY EXAMINER

MAR - 8



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: March 2, 2016

Order#: 032967-030

Re: CONCERTO CLOUD SERVICES, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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: CONCERTO CLO	OUD SERVI	CES, l	LC
2. (a)	208 S. Hoover Boulevard, Suite 200	(b) 4830 W. Kennedy Boulevard, Suite 890		
(,	Principal office address of limited liability company:	_ (0)		Mailing address of limited liability company:
		(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)
		Tampa, FL 33609		ımpa, I	FL 33609
		11/17/2014	M1	40000	08306
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	TK Registered Agent, Inc.			
٥.	(a)	Registered Agent and Registered Office shown on the records of th	e Florida Dept.	of State	- e:
		101 E. Kennedy Boulevard, Suite 2700			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				- 70 ZOI	
					206.1
		Tampa, FL	33602		
					F 9:5
(b)	Corporation Service Company			- Es 🤦 💆
		Enter name of NEW Registered Agent and/or NEW Registered Office address:			9: 51 ORBIT
		1201 Hays Street			
		NEW Registered Office Address:			-
					-
		Tallahassee , FL	32301		
16.1	,.			0.71	
		mited liability company is not organized under the laws nge or changes are made, the Florida street address of the			
ager	nt w	vill be identical. Or, in the case of a Florida limited liab	ility compar	ny, it is	s hereby confirmed that the change(s)
the a	arti	ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	mited liabili	ty con	pany.
			Dona Prie	ebe. A	uthorized Person
Sig	gnat	are of a member (thorized representative of a member	<u> </u>		Printed or typed name of signee
1 he	rel	accept the appointment as registered agent and agree	e to act in th	is cape	acity. I further agree to comply with the
the o	obli	ons of all statutes relative to the proper and complete po igations of my position as registered agent as provided by reflect a change in the registered office address, I he	erjormance (for in Chapt	er 605	F.S. Or, if this document is being filed
to m notij	ere fiea	ly reflect a change in the registered office address, I he lin writing of this change	reby confirm	n that	ine timited trability company has been
		Jehn augget			
Sign	atur	e o Registered Agent Corporation Service Company	BY: Sylvia	Quep	pet

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00