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(Requestor's Name)					
(Address)					
(Address)					
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(Cit	n/State/7in/Phon	e #N			
(City/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
(3)		•			
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Certified Copies Certificates of Status					
Special Instructions to	Filing Officer:				
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Office Use Only



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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: November 17, 2020

Order#: 508276-183

Re: GNSS 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

251 Little Falls Drive 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	ame of the limited liability company:				
2. (a)	7950 Jones Branch Drive	(b)			
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing add	ress of limited liability company: IAY BE POST OFFICE BOX)	
	McLean, VA 22107				
	02/23/2015		M15000001426		
3.	Date of filing/registration in Florida	4.	Documer	nt number	
5. (a)	C T Corporation System				
J. (u)	Registered Agent and Registered Office shown on the records	s of the Florida	Dept. of State:		
	1200 South Pine Island Road				
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)			
	Plantation	33324			
		rL		,	
(b)					
(0)	Enter name of NEW Registered Agent and/or NEW Register	red Office add	<u>(658</u> :	61 n035	
				 9	
	Corporation Service Company	<u>.</u>		-,	
	NEW Registered Office Address:			T.:	
	1201 Hays Street			 ښ	
				!	
	Tallahassee	FL_32301			
change agent was/w	limited liability company is not organized under the e or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the companication of the operating agreement of the companication or the operating agreement of the companication of t	the registered d liability con rs of the limit	l office and the busi npany, it is hereby c ted liability compan	ness office of the registered confirmed that the change(s)	
			Jill Cilmi, Authorized Person		
_	ature of a member or authorized representative of a member			typed name of signee	
provis the ob- to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and completing all statutes relative to the proper and completing all statutes provided in the registered agent as provided reflect a change in the registered office address, and in writing of this change.	agree to act i ete performai ided for in Ci , I hereby coi	n this capacity. I funce of my duties, and apter 605, F.S. Or of the limited	orther agree to comply with the d I am familiar with and accept if this document is being filed d liability company has been	
		Corporatio	rporation Service Company		
Signature of Registered Agent An			mi M. Casper, Asst. Vice President		