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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 19, 2020

Order#: 520752-044

Re: ENGINEERING SYSTEM SOLUTIONS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

 $XX_{\underline{}}$ 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.

OUCA.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.	Name of the limited liability company:ENGINEERIN	IG SYSTEM SC	DLUTIONS, LLC
2. (a	4943 N 29th F Suite A	(b)	
2. (0	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)
	Idaho Falls, ID 83401	- -	
	02/23/2015	M15	5000001629
3.	Date of filing/registration in Florida	4.	Document number
5. (NRAI Services, Inc		
5. (a	Registered Agent and Registered Office shown on the records	t. of State:	
	1200 South Pine Island Road		
	Registered Office Address (MUST BE FLORIDA STREE	23	
	Plantation ,	FL_33324	t. of State:
(t	Enter name of NEW Registered Agent and/or NEW Register Corporation Service Company	red Office address	: <u> </u>
	NEW Registered Office Address:		
	1201 Hays Street		
	Tallahassee, l	52301 FL	
chan agen was/	e limited liability company is not organized under the lage or changes are made, the Florida street address of the twill be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the memberaticles of organization or the operating agreement of the	he registered of liability compa s of the limited	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in
13/ Justin Judy			udy, Manager
_	nature of a member or authorized representative of a member		Printed or typed name of signee
I he prov the o to me notif	reby accept the appointment as registered agent and a isions of all statutes relative to the proper and complet bligations of my position as registered agent as provid prely reflect a change in the registered office address, ted in writing of this change	gree to act in the le performance ded for in Chap I hereby confir	his capacity. I further agree to comply with the of my duties, and I am familiar with and accept ter 605, F.S. Or, if this document is being filed m that the limited liability company has been
	er m Lei	Corporation S	ervice Company
Signature of Registered Agent Ami M. Casper, Asst. Vice President			