M1500000280Z

(Requestor's Name)									
•										
(.	Address)									
(Address)										
(City/State/Zip/Phone #)										
PICK-UP	WAIT MAIL									
	•									
(Business Entity Name)									
(Document Number)									
Certified Copies	Certificates of Status									
	Siling Officers									
Special Instructions to	Filing Officer:									
i										

Office Use Only



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2022 FEB 28 PM 3: 38022 FEB 28 A

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195							
REFERENCE : 55698 8360133							
AUTHORIZATION : //							
COST LIMIT : \$ 25.00							
ORDER DATE : February 3, 2022							
ORDER TIME : 1:49 PM							
ORDER NO. : 456965-027							
CUSTOMER NO: 8360133							
CHANGE OF AGENT							
NAME: STS SYSTEMS INTEGRATION, 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:	S IN I E	GH	ATION, LLC					
2	(a)	1826 North Loop 1604 West, Suite 350		(b)						
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)						
		San Antonio, TX 78248			Huntsville, AL 35806			<u> </u>		
		04/16/2015		_	M15000002802					
3.		Date of filing/registration in Florida	4.		Document nu	nber				
5	(a)	C T Corporation System								
٠.	(a)	Registered Agent and Registered Office shown on the records of 1200 South Pine Island Road	the Flor	rida	Dept. of State:					
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)								
		Plantation, FI	L_3332	24		 	2022 FE8	ı		
(t	(b)						::: :>	• .		
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	d Office	nde	dress:		တ	1		
		Corporation Service Company					· · ·	'T 1		
		NEW Registered Office Address:					••••			
		1201 Hays Street								
		Tallahassee, Fl	L_3230	1						
ch ag wa	ange ent v as/we	imited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	regist ability of the l	ere co lim	d office and the business mpany, it is hereby confir ited liability company or	office of the of the of the office of the of	he regis he chan	tered ge(s)		
1	s/ Ji	ll Cilmi	_	Ji ll t	Cilmi, Authorized Person			, <u></u>		
	_	ture of a member or authorized representative of a member			Printed or typed					
pr thi to	ovisi e obl mere	by accept the appointment as registered agent and age ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ty reflect a change in the registered office address, I	perjor d for ii hereby	ma n C ' co	ince of my duties, and I al Chapter 605, F.S. Or, if th Infirm that the limited lial	agree to o m familiar his docume hility comp	comply with an int is be any has	with the nd accept ing filed s been		
no	прес	in writing of this change.	orpora	tio	on Service Company					
Si	gnalu	re of Registered Agent	.mi M.	. Ca	asper, Asst. Vice Presid	lent				