

ME01105725

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

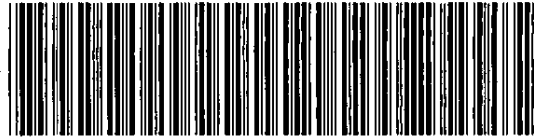
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100297444541

FILED
STATE
SECRETARY OF
TALLAHASSEE, FLORIDA
17 APR -4 AM 8:59

APR 05 2017
S. YOUNG

RECEIVED
2017 APR -4 AM 10:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 582977 7450386

AUTHORIZATION

COST LIMIT : \$ 25.00



ORDER DATE : April 4, 2017

ORDER TIME : 10:12 AM

ORDER NO. : 582977-015

CUSTOMER NO: 7450386

FILED STATE
SECRETARY OF
TALLAHASSEE, FLORIDA
17 APR -4 AM 8:59

CHANGE OF AGENT

NAME: STRAN TECHNOLOGIES IT
SERVICES LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Melissa Zender

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Stran Technologies IT Services LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Emily Lando, Senior Paralegal
Name of Person

Corning Incorporated
Firm/Company

One Riverfront Plaza
Address

Corning, New York 14831
City/State and Zip Code

landoe@corning.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Emily Lando at (607) 974-9000
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$55 Filing Fee & Certified Copy

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 APR -4 AM 8:59

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: Stran Technologies IT Services LLC

2. (a) 39 Great Hill Rd, Naugatuck CT 06770 (b) _____
 Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) *(Note: MAY BE POST OFFICE BOX)*

3. July 21, 2015 4. _____
 Date of filing/registration in Florida Document number

5. (a) _____
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

C T Corporation System
 Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
1200 South Pine Island Road
Plantation, FL 33324

FILED STATE
 SECRETARY OF
 TALLAHASSEE, FLORIDA
 17 APR -4 AM 8:59

(b) Corporation Service Company
 Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

1201 Hays Street
NEW Registered Office Address:

Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

 Signature of a member or authorized representative of a member Christopher Fairburn
 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 Corporation Service Company BY: **Melissa Zender**
Asst. Vice President

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