Division of Corporations



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Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		_			<u> </u>	
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LLC REGISTERED AGENT CHANGE CONECSUS LLC

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O SIMMONS FEB 19 2020

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.

l. N	ame of the limited liability company: Conecsus LLC						
2. (a)	THE TUTAC INDIVIN	(b) 106 T	(b) 106 TEJAS DRIVE Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
(44)	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)	. (0)					
•	TERRELL, TX 75160	TERR	RELL, TX 75160				
		<u> </u>		•			
	09/23/2015	М15000	0007620				
3	Date of filing/registration in Florida	4.	4. Document number .				
5. (a	UNITED STATES CORPORATION AGENTS, INC.						
, ,	Registered Agent and Registered Office shown on the records of t 5575 S. SEMORAN BLVD.	7 Sec. 2020					
	Registered Office Address (MUST BE FLORIDA STREET) Suite 36	FEB 18	M				
	ORLANDO	32822					
(b)	C T Corporation System		AMIO: 23	_)			
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:					
	NEW Registered Office Address:						
	1200 South Pine Island Road						
	Plantation , FL	33324	· · · · · ·				
the ch agent was/w the ar	limited liability company is not organized under the laviange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the registered or ability company of the limited lia	office and the business office of the register, it is hereby confirmed that the change(s) ability company or as otherwise provided in company. Sack A. Scott	ered			
_	ature of a filember or authorized representative of a member		Printed or typed name of signee				
	eby accept the appointment as registered agent and agressions of all exattites relative to the proper and complete oligations of my position as registered agent as provide rely reflect f change in the registered office address. I seed in fritting of fails affilies. 1. To organism for the complete of the control of the		r 603, r.s. Or, ij inis aocument is being ji that the limited liability company has beet				