To: 18506176383 From: 14693173436 Date: 07/13/22 Time: 9:25 PM Page: 01/02



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(((H22000238961 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

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

| Ema1] | . Address: | <br> |  |  |  |
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|       |            |      |  |  |  |

## LLC REGISTERED AGENT CHANGE ACS CABLE SYSTEMS, LLC

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 01      |
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

(((H22000238961 3)))

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: ACS Cable System  | is, LLC                                 | :                      |  |   |   |   |  |  |  |
|---------------------------|--|--|---|------------------------|--|---|---|---|--|--|--|
| 2.                        | (a)                                    |  |   |                        |  |   |   |   |  |  |  |
|                           | • •                                    | Principal office address of limited hability company (Note: MUST BE STREET ADDRESS)  |   |                        | (b)  |   |   |   |  |  |  |
|                           |  | 600 TELEPHONE AVE MS 65  |   |                        | 600 TELEPHONE AVE MS 65                                  |   |   |   |  |  |  |
|                           |  | ANCHORAGE, AK 99503  |   |                        | ANCHORAGE, AK 99503                                      |   |   |   |  |  |  |
|                           |  | 06/14/2016   |   | Ŋ                      | <b>41600000</b> 4  | 8-19  |   |   |  |  |  |
| 3.                        |  | Date of filing/registration in Florida   | 4.                                      | _                      |  | Document nu   | mber  |   |  |  |  |
| 5.                        | (a)                                    |  |   |                        |  |   |   |   |  |  |  |
|                           |  | Registered Agent and Registered Office shown on the records of the Florida Dept-of State NORTHWEST REGISTERED AGENT LLC.   |   |                        |  | •   |   |   |  |  |  |
|                           |  | Registered Office Address  | DDRES                                   | <u>(SS)</u>            | <del></del> -  | -   |   |   |  |  |  |
|                           |  | 7901 4TH STREET N, SUITE 300   |   |                        |  |   |   |   |  |  |  |
|                           |  | ST.PETERSBURG , FL   | 33702                                   |                        |  | -   | -   | 2022                                    |  |  |  |
|                           |  |  |   |                        |  |   | ٠.  | .022 JUL 1                              | ;  |  |  |
|                           | (b)                                    | nter name of NEW Registered Agent and/or NEW Registered Office address   |   |                        |  | -   | -   | <del>-</del>                            |  |  |  |
|                           |  | Enter hance of NEW Registered Agent and/or NEW Registered  | Conner a                                | uu                     | ress   |   |   |   |  |  |  |
|                           |  | LEGALING CORPORATE SERVICES INC.   |   |                        |  |   | ٠   | ÁĦ                                      | · . È  |  |  |
|                           |  | NEW Registered Office Address  |   |                        |  | -   |   | . <u>დ</u> .                            |  |  |  |
|                           | 5237 SUMMERLIN COMMONS BLVD. SUITE 400 |  |   |                        |  | _   |   | 9                                       |  |  |  |
|                           |  | FORT MYERS   | 33907                                   |                        |  |   |   |   |  |  |  |
|                           |  | FORT MYERS , FL  |   |                        |  | -   |   |   |  |  |  |
| cha<br>age<br>was<br>the  | inge<br>int v<br>s/we<br>arti          | mited liability company is not organized under the law<br>or changes are made, the Florida street address of the result be identical. Or, in the case of a Florida limited liab<br>are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the least of the least of organization or the operating agreement of the least of organization or the operating agreement of the least of the | egister<br>oility e<br>the lir          | red<br>on<br>nit       | office and<br>pany, it is<br>ed liability                | I the business<br>hereby confir<br>company or a                           | office o<br>med tha                           | f the rep<br>it the ch                  | gistered<br>ange(s)                                  |  |  |
|                           |  | Mary Mabey use of a member or authorized representative of a member  | Ma                                      | rу                     | Mabey  |   |   |   |  |  |  |
| S                         | ignat                                  | uie of a wember or authorized representative of a member   |   |                        |  | Printed or typed  | name of                                       | signee                                  |  |  |  |
| pro<br>the<br>to r<br>not | obl<br>nere<br>ified                   | by accept the appointment as registered agent and agre<br>ons of all statutes relative to the proper and complete p<br>igations of my position as registered agent as provided<br>by reflect a change in the registered office address, I had<br>I in writing of this change.  | e to ac<br>perform<br>for in<br>ereby c | t n<br>nar<br>Ch<br>on | n this capa<br>ace of my a<br>lapter 605,<br>firm that t | icity. I further<br>luties, and I ar<br>F.S. Or, if th<br>he limited liab | agree t<br>n famili<br>us docui<br>pility cor | o comp<br>ar with<br>ment is<br>mpany l | ly with the<br>and accept<br>being filed<br>ias been |  |  |
| Sig                       | natu                                   | Medin Allen<br>e of Regreered Agent  |   | (                      | ((H2200  | 00238961 3  | 5)))  |   |  |  |  |