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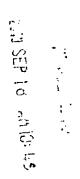
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscqlobal.com

Date: September 16, 2019

Order#: 903514-013

Re: GERBER TECHNOLOGY LLC

Enclosed please find:

Please take the following action:

XX 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.

QUCA.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.	Na	me of the limited liability company: GERBER TECH!	NOLOG	Y LLC	
2.	(a)	24 Industrial Park Road West	(b)	1	
	. ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	、		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Tolland C1 06084	_		
		01/11/2017	_	M1700000	00308
3.		Date of filing/registration in Florida	-1 .		Document number
5.	(a)	NRAI Services, Inc.			
	` /	Registered Agent and Registered Office shown on the records of th	se Florida	Dept. of State	200
		1200 South Pine Island Road			
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)		SEP 10 ALIO HO
		Plantation .FL	33324		Ö. ÷.
(b)	(b)	Corporation Service Company			
	•	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>)ffice add	ress!	
		1201 Hays Street			
		NEW Registered Office Address:			
		Tallahassee , FL	32301		
the age was the	cha nt w s/we artic	mited liability company is not organized under the laws nge or changes are made, the Florida street address of to vill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cless of organization or the operating agreement of the liability of a member or authorized representative of a member	he regis bility con the limi imited li	ered office npany, it is ted liability ability com	and the business office of the registered shereby confirmed that the change(s) company or as otherwise provided in
pro the to n not	visie obli nere ifiea	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided its reflect a change in the registered office address. I he is writing of this change. The of Registered Agent Corporation Service Company	verforma för in C ereby co	nce of my a hapter 605 nfirm that i	acity. I further agree to comply with the luties, and I am familiar with and accept . F.S. Or. if this document is being filed

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