## 11/7000002825

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

Office Use Only



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2023 OCT 30 PK 12:

TSION OF CORRESPOND AN

RECEIVED





CORPORATION SERVICE COMPANY

CONTACT PERSON: Eyliena Baker

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	12000000	0195	
	REFERENCE	:	084531	8429361	
	AUTHORIZATION	:	0	No.	
	COST LIMIT	:	\$ 25.00	ulderson	
	October 23, 2023				
ORDER TIME :	1:30 PM				
ORDER NO. :	084531-373				2023 OCT
CUSTOMER NO:	8429361				
					30 
	CHANGE OF A	<u>GEN</u>	<u>T</u>		:21 Hd
					0,
NA ME	CDID ONE COLU	ጥተሶ	NC IIC		
NAME:	GRID ONE SOLU	110	NS, ELC		
מו בא כבי סבידווסאו	THE FOLLOWING AS	ספ	OOF OF EI	I TMC ·	
FLEASE RETURN	THE FOLLOWING AS	PK	OOF OF FI	DING:	
	FIED COPY STAMPED COPY				

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	ame of the limited liability company: GRID ONE SOLU	JTIONS	3. —	, LLC		
7	(a)	708 BLAIR MILL RD	708 BLAIR MILL RD				
	()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_	,	Mailing address of limited liab (Note: MAY BE POST OF)		•
		WILLOW GROVE, PA 19090	_	-	WILLOW GROVE, PA 19090		
		04/03/2017	_	•	M17000002825		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)	CT CORPORATION SYSTEM					
· (	()	Registered Agent and Registered Office shown on the records of the	Dept, of State:				
		Registered Office Address (MUST BE FLORIDA STREET A.	1	21	말		
		1200 S PINE ISLAND RD		123 (	0181710		
		PLANTATION . FL	33324			2023 OCT 30	2. 2. 2. 3.
i	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office add</u> Corporation Service Company			lress:	PM 12: 40	PCRATOR
		NEW Registered Office Address:					
		1201 Hays Street					
		Tallahassee FL_	32301				
ch ag wa	ange ent v is/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liable.	egistero ility co the lim mited l	ed om nite lial	d office and the business office of the npany, it is hereby confirmed that the ted liability company or as otherwis	e register ne change	ed (s)
_	Signar	ture of a member or authorized representative of a member		_	Printed or typed name of sign	ee	
pro the to	ovisie r obli mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ly reflect a change in the registered office address. I he I in writing of this change.	e to act erform for in C vreby co	in an Ch on,	in this capacity. I further agree to conce of my duties, and I am familiar whapter 605, F.S. Or, if this documentism that the limited liability compa	omply with and a nt is being my has b	th the accept g filed een
Sig	 gnatui	Thank C-Kubly re of Registered Agent	C	ìra	race E. Kirby, Asst. Vice President		