11000001

(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



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ALLAMAJOLU. I LUR

DEC 1 4 SOSI ALBRITTON CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE :

293743

AUTHORIZATION

COST LIMIT

ORDER DATE: December 10, 2021

ORDER TIME : 5:41 PM

ORDER NO. : 293743-005

CUSTOMER NO: 8352393

CHANGE OF AGENT

NAME: DRB SYSTEMS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

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.

I. Na	ame of the limited liability company: DRB SYSTEMS	, LLC						
2. (a)	3245 Pickle Road	((b)	3245 Pickle Road				
` '	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		,		Mailing address of limited lia (Note: MAY BE POST Of		•	
	Akron, OH 44312	_		Akron, Ol	H 44312			
	08/23/2017		ı	M170000	07250			
3.	Date of filing/registration in Florida	4.			Document number			
5. (a)	BUSINESS FILINGS INCORPORATED							
, ,	Registered Agent and Registered Office shown on the records of to 1200 South Pine Island Road Registered Office Address (MUST BE FLORIDA STREET A							
			_		_	2621		
	Plantation FL	33324			_			
(b)	Corporation Service Company			'	_	<i>∷</i> ω	•	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:					72	- 3	
	1201 Hays Street					8: 2	أو-	
	NEW Registered Office Address:	_	0					
	Tallahassee, FL	32301			_			
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	register bility co f the lin	red om nit	office an ipany, it is ed liabilit	d the business office of t s hereby confirmed that i y company or as otherwi	he regist the chang	ered ge(s)	
	/s/ Jill Cilmi			Jill Cilmi, Authorized Person				
_	ture of a member or authorized representative of a member				Printed or typed name of sig			
provisi the obl to mere	by accept the appointment as registered agent and agre 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 h I in writing of this change.	ee to ac perform I for in e ereby c	t ir ian Ch on	n this cape ace of my eapter 605 firm that	acity. I further agree to duties, and I am familiar 5, F.S. Or, if this docume the limited liability comp	comply with and mith and ont is bein only has	with the d accept ng filed been	
Signatu Grace E	re of Registered Agent . Kirby, Asst. Vice President on behalf of Corporation Service Com		_	T.11-1				