41800001384

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE
JUN 1 5 2022

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

:•

	ACCOUNT NO.	:	I2000000195
	REFERENCE	:	
	AUTHORIZATION	:	Spullenan
	COST LIMIT	:	\$ 25.00
ORDER DATE :	June 13, 2022		
ORDER TIME :	8:28 AM		
ORDER NO. :	738994-011		
CUSTOMER NO:	8285693		

CHANGE OF AGENT

NAME :	GROUND	PENETRATING	RADAR
	SYSTEMS	S, LLC	

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

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.

GROUND PENETRATING RADAR SYSTEMS, LLC

	ame of the limited liability company:	<u>.</u>		SYSTEMS, LLC				
2. (a)			(b)					
	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)			b)				
	5217 MONROE ST.		5217 MOI	NROE ST.				
	TOLEDO, OH 43623		TOLEDO.	OH 43623				
	02/05/2018		M1800000	1384				
3.	Date of filing/registration in Florida	4.	<u> </u>	Document number				
5. (a)							
,	Registered Agent and Registered Office shown on the record URS AGENTS, LLC	s of the Florid	la Dept. of State	- 1:				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			-				
	3458 LAKESHORE DRIVE							
	3458 LAKESHORE DRIVE				SE	202		
	3458 LAKESHORE DRIVE TALLAHASSEE	. FL		-	SECRET:	NNC 2202	- T _i	
(b)	TALLAHASSEE			-	SECRETARY O	2022 JUN 4		
(b)	TALLAHASSEE			-	SECRETARY OF S			
(b)	TALLAHASSEE				SECRETARY OF STATE		FILED	
(b)	TALLAHASSEE Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regist</u>			- - -	SECRETARY OF STATE	2022 JUN 14 AM 11: 03	FILED	
(b)	TALLAHASSEE Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regist</u> Corporation Service Company	ered Office a	ddress:	- - -	SECRETARY OF STATE		FILED	

change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

the articles of organization or the operating agreement of the i	nimited hability company.
/s/ Matt Aston	Matt Aston, Member
Signature of a member or authorized representative of a member	Printed or typed name of signee
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete the obligations of my position as registered agent as providea to merely reflect a change in the registered office address. I h notified in writing of this change.	ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept for in Chapter 605, F.S. Or, if this document is being filed ereby confirm that the limited liability company has been
Drace 2-Kuble	Grace E. Kirby, Asst. Vice President
Signature of Registered Agent	
Division of Corporations• P.O. B	80x 6327● Tallahassee, FL 32314
FILING FI	EE: \$25.00