

M18000000 4770

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

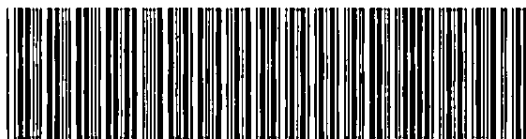
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000365298810

05/05/21--01006--030 **25.00

2021-11-05 AM 2:55

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EM3 Networks LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Monique Lacy

Name of Person

RTC Associates, LLC

Firm/Company

4330 South lee Street Building 800B

Address

Buford, GA 30518

City/State and Zip Code

client_emails@rtcteam.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Monique Lacy

Name of Person

678

at ()

436-5590 x 308

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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. Name of the limited liability company: EM3 Networks LLC

2. (a) EM3 Networks LLC

Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

810 Pennsylvania Street Suite 205

Lawrence, KS 66044

(b) RTC Associates, LLC

Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

4330 South Lee Street Building 800B

Buford, GA 30518

M18000004770

3. Date of filing/registration in Florida

4. Document number

5. (a)

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

COGENCY GLOBAL INC.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

115 N CALHOUN ST, SUITE 4

TALLAHASSEE, FL 32301

(b)

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

INCorp SERVICES, INC

NEW Registered Office Address:

17888 67TH COURT NORTH

LOXAHATCHEE, FL 33470

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the 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.

Timothy D. Yager

Signature of a member or authorized representative of a member

Timothy D. Yager

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Wendy Hefley
Signature of Registered Agent

Wendy Hefley on behalf of InCorp Services, Inc.

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