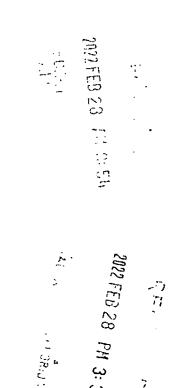


	(Requestor's Name)	•
	(Äddress)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	(Business Entity Name)	_
	(Document Number)	-
ertified Copies	Certificates of Status _	
Special Instructions to	o Filing Officer:	

Office Use Only



900382640419



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 120000000195 REFERENCE : 156955 8360133 AUTHORIZATION : \$ 25.00					
ORDER DATE : February 3, 2022					
ORDER TIME : 1:49 PM					
ORDER NO. : 456965-047					
CUSTOMER NO: 8360133					
CHANGE OF AGENT NAME: STS SYSTEMS SUPPORT, LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN 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.

1 Na	me of the limited liability company:	MS SUPP	ORT LLC		
	1826 North Loop 1604 West, Suite 336 A		(b) 7067 Old Madison Pike, Suite 170		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		<u> </u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	San Antonio, TX 78248		Huntsville	e, AL 35806	
	11/15/2018		M1800001	10264	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	C T Corporation System				
5. (a)	Registered Agent and Registered Office shown on the records	of the Flori	da Dept. of Sta	ite:	
	1200 South Pine Island Road				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			2022 FE	
	Plantation	FL_33324	ŀ		
	,	rL			
(b)	Enter name of NEW Registered Agent and/or NEW Register	red Office a	ddresş:		
	NEW Registered Office Address:	_			
	1201 Hays Street			_	
	Tallahassee,	FL_32301		_	
change agent was/w	limited liability company is not organized under the e or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the street in the content of the content	the registed liability of the limited the limited	ared office and company, it mited liability con	is hereby confirmed that the change(s) ity company or as otherwise provided in mpany.	
	ill Cilmi	horized Person			
I here provis the ob	sture of a member or authorized representative of a member aby accept the appointment as registered agent and elions of all statutes relative to the proper and completing at the proper and completing at the proper and completing at the proper and completing acceptance of the proper and completely reflect a change in the registered office address, and in writing of this change.	ete perjori ided for in , I hereby	Chapter 60 confirm that	Printed or typed name of signee pacity. I further agree to comply with the pacities, and I am familiar with and accept 15, F.S. Or, if this document is being filed to the limited liability company has been e Company	
Signat	ure of Registered Agent	Ami M.	Casper, As	sst. Vice President	