M1800010728

(Requestor's Name)						
(1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (
(Address)						
(Addiess)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
(Boodine Namber)						
Certified Copies Certificates of Status	_					
Special Instructions to Filing Officer:						
	-					

Office Use Only



900379993659

ATLAHASSEE, HOE

1022 FEB 18 PM 12: 02



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

8360133

REFERENCE : 456957

AUTHORIZATION :

COST LIMIT : \$\alpha_5 \sqrt{\phi}_0

ORDER DATE: February 3, 2022

ORDER TIME : 1:47 PM

ORDER NO. : 456957-298

CUSTOMER NO: 8360133

CHANGE OF AGENT

NAME: SES TECHNOLOGIES LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

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: SES TECHNOL	OGIES	SIES LLC			
2.	(a)	1006 Floyd Culler Court, Suite 10	(b)			
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		Oak Ridge, TN 37830	_				
		11/21/2018		M1800001	10728		
3.		Date of filing/registration in Florida	4.		Document number		
5	(a)	C T Corporation System					
	(4)	Registered Agent and Registered Office shown on the records of 1200 South Pine Island Road	 tte:				
		Registered Office Address (MUST BE FLORIDA STREET)	_				
					202		
		Plantation , FL	33324		PON TO THE		
					· — — — — — — — — — — — — — — — — — — —		
	(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office	ddman:			
		Enter manie of the waterstelled Sent and of the waterstelled	OHICE M	uuresą.			
		Corporation Service Company			' 		
		NEW Registered Office Address:			- :		
		1201 Hays Street					
					- .		
		Tallahassee .FL	32301				
cha age was	nge nt w s/we	mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	register ibility co if the lin	ed office ar ompany, it i nited liabilit	nd the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in		
		l Cilmi	Jiil	l Cilmi, Auth	orized Person		
Signature of a member or authorized representative of a member					Printed or typed name of signee		
pro the	visic obli nere	y accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address. I h in writing of this change.	perform I for in (nereby c	ance of my Chapter 60: onfirm that	duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been		
••	,	(PI, W X DW "	_	on Service	- · ·		
Sig	nutan	e of Registered Agent	m w. C	asper, Ass	t. Vice President		