MZ0000001688

(Requestor's Name)						
(Address)						
(Address)						
,						
(City/State/Zip/Phone #)						
(organization in the in)						
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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RAROCHS

DEC 1.6 Z020 LALBRITTON



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Rachel Pietropolo rachael.pietropolo@cscglobal.com

Date: November 6, 2020

Order#: 462222-002

Re: BIRDSEYE TECHNOLOGIES, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

 \overline{XX} Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Rachel Pietropolo c/o Corporation Service Company 251 Little Falls Drive

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

OUCA.XCOA

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.

2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 8554 KATY FREEWAY STE 200	(b)		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				
	8554 KATY EDEEMAY STE 200			illing address of limited (Note: MAY BE POST	
	0304 IVATT T NEEVANT 51E 200		8554 KATY	FREEWAY STE 20	0
	HOUSTON, TX 77024		HOUSTON	, TX 77024	
	01/31/2020		M200000016	688	
3.	Date of filing/registration in Florida	4.	D	ocument number	
5. (a)					
5. (a)	Registered Agent and Registered Office shown on the records of	of the Florida	Dept. of State:		
	PARACORP INCORPORATED				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				~ ;
	155 OFFICE PLAZA DR 1 FLOOR				
	TALLAHASSEE .	32301			
	, I	·L			
71-3					
(b)	Enter name of NEW Registered Agent and/or NEW Register	ed Office ad	dress:		:
					<u>6</u> .
	Corporation Service Company				찞
	NEW Registered Office Address:				
	1201 Hays Street				
	Tallahassee , E	L_32301_			
change agent v was/we	imited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	ne registere liability co s of the lim	ed office and t mpany, it is h ited liability of	the business office on hereby confirmed that company or as other	of the registered at the change(s)
/s/ .	Jill Cilmi	Jill (Cilmi, Authoria		
Signa	iture of a member or authorized representative of a member		F	rinted or typed name of	signee
the obito mer notifies	by accept the appointment as registered agent and agions of all statutes relative to the proper and complet ligations of my position as registered agent as provide ely reflect a change in the registered office address. In writing of this change. The of Registered Agent E. Kirby, Asst. Vice President of Corporation Service Company	gree to act le performa led for in (I hereby co	in this capac ance of my du Chapter 605, l onfirm that the	ity. I further agree (ties, and I am famili F.S. Or, if this docu e limited liability co.	to comply with the iar with and accept ment is being filed mpany has been

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