1/31/25, 2:41 PM

Division of Corporations

12122023573

Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000038762 3)))



H2500003876234BC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

LLC REGISTERED AGENT CHANGE NATIONAL NETWORK SERVICES OF TENNESSEE, LĹĆ

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

Electronic Filing Menu Corporate Filing Menu

Help

From: Daylen Platt

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. N	ame of the limited liability company: NATIONAL NET	TWORK :	SERVICES, I	LLC	
2. (a)	\$13 RIDGE LAKE BLVD.	(h	(b) \$13 RIDGE LAKE BLVD.		
z. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	MEMPHIS, TN 38120-9403		MEMPHIS	TN 38120-9403	
	02/14/2020		M200000018	810	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	PARACORP INCORPORATED				
(,	Registered Agent and Registered Office shown on the records of a 155 OFFICE PLAZA DRIVE	the Florida	Dept, of State	::	
	Registered Office Address (MUST BE FLORIDA STREET) 1ST FLOOR	ADDRESS	ù	20	
(b)	TALLAHASSEE FL	32301		FIL 2025 JAN 31 SECONTAIN	
	C T Corporation System			N 31	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			# 9: 0 B B B C	
	NEW Registered Office Address:			06	
	1200 South Pine Island Road				
	Plantation FL	33324			
the ch agent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liatere authorized by an affirmative vote of the members of interesting agreement of the James A. Howard.	the reginability confirmation of the limited l	stered office ompany, it is sited liability liability com	and the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in	
Sign	ittle 61 a 11 cmber or authorized representative of a member	27714		Printed or typed name of signee	
I here provis the ob to mer	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided elv reflect a change in the registered office address. It did in writing of this change. C T Corporation System	perform d for in (hereby c	ance of my c	acity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been	