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Account Name : UNITED AGENT GROUP INC.

Account Number : 120160000086 : (561)508-5033 Phone Fax Number : (561)694-1639

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## LLC REGISTERED AGENT CHANGE ONPOINT DIGITAL SOLUTIONS, LLC

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## 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.

l. Na	me of the limited liability company:  OnPoint Digital Sof	lutions.		
	4111 East 37th Street North	(b) 4111 East 37th Street North		
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (~	1	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	Wichita, KS 67220	- -	Wichita, K	S 67220
	06/29/2020		M2000000	
3.	Date of filing/registration in Florida C T CORPORATION SYSTEM	4,		Document number
5. (a)	Registered Agent and Registered Office shown on the records of the 1200 S PINE ISLAND RD			2 <b>2.</b>
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>S)</u>	FILED 2121 JUL 13 AM II; 00 SELTABAST OF STATE ALLAHASSEET FLORED
(р)	PLANTATION ,FL	33324		FILED 13 AM SSEE FOR
	United Agent Group Inc.	^ <b>**</b>		111: 00 51A1C 1.0R#0
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	<u>garess</u> :	St. O
	801 US Highway 1			_
	NEW Registered Office Address:			_
	North Palm Beach , FL	33408		_
chang agent was/v the ar	limited liability company is not organized under the law se or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	ability of the li	company, it mited liabil Hiability co	is hereby confirmed that the change(s) ity company or as otherwise provided in impany.  ttorney-In-Fact
T 1	eby accept the appointment as registered agent and agrisons of all statules relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I seed in writing of this change.  Danielle Gosan	d for in hereby	Chapter 60 confirm tha	75, F.S. Or, if this document is being filed the limited liability company has been
Signa	ture of Registered Agent		.a	Acces ET 37314

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