7/12/2023

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:				-
	Division of Corporations			w
	Fax Number	: (850)617-638	13	P
From:				دب
	Account Name	: UNITED AGENT	GROUP INC.	Ö
	Account Number	: I20160000086	i	5
	Phone	: (561)508-503	3	
	Fax Number	: (561)694-163	9	

LLC REGISTERED AGENT CHANGE INFOR (US), LLC

Certificate of Status	0		
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Estimated Charge	\$25.00		

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A. LUNT

Electronic Filing Menu

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Help

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. 1	Name of the limited liability company: Infor (US), LLC]				
2. (a	4111 East 37th Street North	(b) 4111 East 37th Street North				
<u> </u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(5)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Wichita, KS 67220	_	Wichita, KS 67220			
	12/(1/2020		M2000001	1561		
3.	Date of filing/registration in Florida	4.		Document number		
5. (8	C T CORPORATION SYSTEM					
(-	Registered Agent and Registered Office shown on the records of	ate:				
	1200 SOUTH PINE ISLAND ROAD	<u>_</u>				
	Registered Office Address (MUST BE PLORIDA STREET					
	PLANTATION	3332	4	21 JUL 13 PM 3: 00		
	,, t	L		_ ~		
(b	United Agent Group Inc.			곡 ਨੇ		
(0)	Enter name of NEW Registered Agent and/or NEW Registere					
				00		
	801 US Highway 1					
	NEW Registered Office Address:					
	North Palm Beach	3340	8	_		
	, ,	L <u></u>		-		
chang agent was/v	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of prgamization or the operating agreement of the	e regis iability of the limite	tered office ar company, it i limited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.		
Sign	ature of a member or authorized representative of a member	-		Printed or typed name of signee		
provis the ob to nie	eby accept the appointment as registered agent and agentions of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I are in writing of this change. Danielle Gossm	perfo ed for i hereby	rmance of my n Chapter 60. v confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been		
Signat	ure of Registered Agent	, . ,	A A INT. DACLAD	ary		