

MA1000010673

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

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2023 SEP 11 PM 12:07

SEP 11 2023

ALLAHASSEE, FLORIDA

2023 SEP 11 PM 3:32

RECEIVED

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 963481 8417348

AUTHORIZATION :

COST LIMIT : \$ 25,000



ORDER DATE : August 31, 2023

ORDER TIME : 2:17 PM

ORDER NO. : 963481-184

CUSTOMER NO: 8417348

CHANGE OF AGENT

NAME: SYMETRY COMMUNICATIONS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS: _____

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. Name of the limited liability company: SYMETRY COMMUNICATIONS, LLC

2. (a) _____ (b) _____
 Principal office address of limited liability company: Mailing address of limited liability company:
 (Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

3701 COMMUNICATIONS WAY
EVANSVILLE, IN 47715

8837 BOND ST
OVERLAND PARK, KS 66214

08/16/2021

M21000010673

3. _____ Date of filing/registration in Florida 4. _____ Document number

5. (a) _____
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

NATIONAL REGISTERED AGENTS

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

2022 SEP 11 PM 12:07

(b) _____
 Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Corporation Service Company
NEW Registered Office Address:
1201 Hays Street
Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Jill E. Cilmi
 Signature of a member or authorized representative of a member

Jill Cilmi, Authorized Person
 Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Grace E. Kirby
 Signature of Registered Agent

Grace E. Kirby, Asst Vice President