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(Re	questor's Name)	
DA)	diess)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	08/17/2022	
	Merritt Walker	
Referer	nce #:1758390	-
	lame: ALUTIIQ LOGISTICS & MA	AINTENANCE SERVICES, LLC
_	Articles of Incorporation/Authorization	o Transact Business
	Amendment	
V	Change of Agent	
F	Reinstatement	
	Conversion	
<u> </u>	Merger	
	Dissolution/Withdrawal	
F	Fictitious Name	
	Other	
Authoria	zed Amount: \$25	
Signatu	ire:	

P: 800.221.0102

+44 (0)20.3961.3080

P-+852 2682 9633

SWATEMENT 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

				MAINTENANCE SERVICES, LLC
14,	Principal office address of limited liabi (Note: MUST BE STREET AD	ility company:	(0)	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
	No Change		No (Change
	November 9, 2021		_	M21000015254
	Date of filing/registration in I	lorida	4.	Document number
(a)	Corporation Service Company			
(**)	Registered Agent and Registered Office shown	on the records of	the Florida Dept. o	f State:
	1201 Hays Street			
	Registered Office Address (MUST BE FLO	ORIDA STREET	ADDRESS)	2022 AUG 17 SECINLIBERY TALLLAHA
	Tallahassee	, FI	32301-2525	JG 17 AM 9 LAHASSEE,
(b)	COGENCY GLOBAL INC.			SECTION OF
	Enter name of <u>NEW Registered Agent</u> and/or	NEW Registered	Office address:	AH 9: 06 SSEC FL
	115 North Calhoun St., Suite 4			
	NEW Registered Office Address:			
				

the articles of organization or the operating agreement of the limited liability company.

/s/ John A Justice

John A Justice

Signature of a member or authorized representative of a member

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.

/s/ Tim Mayville