(((H24000385201 3)))



H240003852013ABCZ

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From:

Account Name : CAPITOL CORPORATE SERVICES, INC.

Account Number : I20160000048 : (800)345-4647 Fax Number : (800)432-3522

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuo submit Florid	ant to the provisions of sections 605.0114 or 60 is the following statement in order to change	5.0116, Florida Statutes, the undersigned lit its registered office or registered agent, o	nited liability company r both, in the State of	
·	me of the Limited Liability Company: D LOC	AL US, LLC		
2 (a)	7800 DALLAS PARKWAY, STE 580	(b) 7800 DALLAS PARKV	(b) 7800 DALLAS PARKWAY, STE 560 Mailing address of limited liability company: Note: MAI BE POST UPPICE BOX	
(-)	Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	myc Mailing address of lim		
	PLANO, TX 75024	PLANO, TX 75024		
	01/28/2022	M22000001388		
3.	Date of filing/registration in Florida	4. Document number	<u> </u>	
5 (n)	TADLOCK, KIM, SR.			
v. (4)	Registered Agent and Registered Office shown on the re-	ords of the Florida Dept. of State:		
	515 EAST PARK AVE 2ND FL			
	Registered Office Address (MISSI BE FLORIDA S	REET ANDRESS	500 M	
	TALLAHASSEE			
(b)	Capitol Corporate Services, Inc.		.	
(-)	Enter name of NEW Restatered Agent and/or NEW Re	elatored Office address	F	
	515 East Park Avenue 2nd Fl			
	NEW Registered Office Address:		(17)	
	Tallahassee	,FL 32301		
the che agent v	imited liability company is not organized under ange or changes are made, the Florida street add will be identical. Or, in the case of a Florida lin- ere authorized by an affirmative vote of the mo- icles of organization or the operating agreement	ress of the registered office and the business uited liability company, it is hereby confirment of the limited liability company or as o	office of the registered d that the change(s)	
		Printed or typed nam	ton	
	ture of a member or futhanced representative of a member by accept the appointment as registered agent of ions of all statules relative to the proper and co tigations of my position as registered agent as p ety reflect a change in the registered office add d in writing of this change.	Printed or typed sen and agree to act in this capacity. I further ag inplete performance of my chilles, and I am is rovided for in Chapter 605, F.S. Or, if this a coss, I hereby confirm that the limited liability	ree to comply with the miliar with and accept tocument is peing filed by company has been	
	Jan Bretaki E	<u>rian Radecki, Assistant Secretary o</u>	n	
nifitials		ehalf of Capitol Corporate Services,	inc.	
		P.O. Box 6327 • Tallabassee, FL 32314 ING FEE: \$25,00		

INHS18 (2/14)