M220000 802

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
, , ,					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer					

Office Use Only

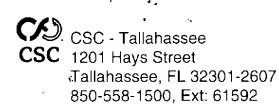


000420785430

2024 JAN 10 PH 1:57 SECRETARY OF STATE TALLAHYS SEEL FL

RECEIVED

2024 JAN 10 PM 3: 18
TALL/MASSEE FLORIDA



To: Department Of State, Division Of Corporations

From: Alexxis Weiland-Sorenson

Ext: 61592 Date: 01/10/24 Order #: 1386153-3

Re: CS WORLDWIDE, LLC Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed-please-find:-

Application for Certificate of Authority

Amount to be deducted from our State Account: \$25.00 - FL State Account Number

I2000000195 Authorization:

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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. N	ame of the limited liability company:	IDE, LLC			
2. (a)	CS WORLDWIDE, LLC	((b) CS WORLDWIDE, LLC Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 10955 LOWELL AVE STE 1007		
2. (1.)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				
	10955 LOWELL AVE STE 1007				
	OVERLAND PARK, KS 66210		OVERLA	ND PARK, KS 66210	
	05/04/2022		M2200000	98028	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)				•	
	Registered-Agent-and Registered-Office shown on the records o	of-the-Florid	a-Dept. of Sta	<u></u>	
	SPENSERV, INC.			FALL FALL	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	201 NORTH FANKLIN ST STE 2150			12 TO	
	TAMPA	33602		- PH - 51	
		1			
(b)	' (a)				
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			_	
	Corporation Service Company				
	NEW Registered Office Address:			_	
	1201 Hays Street			_	
	Tallahassee . F	32301			
10.1 1			0 0.71	-	
change agent v was/we the arti	imited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li- cre authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registero iability co of the lim	ed office an ompany, it i tited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in	
	ture of a member or authorized representative of a member			Printed or typed name of signee	
provisi the obl to mere	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide two reflect a change in the registered office address, I fin writing of this change.	ree to act e performed for in C hereby co	in this cap ance of my of Chapter 603 onfirm that	acity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been	
Signatu	re of Registered Agent				