M2ZDDDD09641

(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



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2022 JUN 30 AM 9: 45

2022 JUN 30 PH

RECHIVED

JUL - 1 2022 S. PRATHER CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 7-76148; 7732404
AUTHORIZATION Spelleran
COST LIMIT : \$ 25.00
ORDER DATE : June 28, 2022
ORDER TIME : 1:38 PM
ORDER NO. : 776148-005
CUSTOMER NO: 7732404
FOREIGN FILINGS
NAME: STRATCAP DATASPHERE 7025 AC SKINNER PARKWAY, LLC
CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY
XXXX AMENDMENT
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT#

COVER LETTER

TO:	_	stration (sion of C	Section Corporations				
SUBJE	ECT:	Stratca	o Datasphere	7025 AC Ski	nner Parkway	, LLC	
			N	ame of Foreig	gn Limited L	iability Co	mpany
Dear S	ir or N	/ladam:					
The en	closed	l applica	tion, certific	ate and fee(s)	are submitte	d for filin	g.
Please	return	all corre	espondence	concerning th	is matter to t	he followi	ng:
Kimber	nley Ro	eten					
			Name of	Person			
EdgeC	onnex	, înc.					
_			Firm/Con	ipany			
2201 C	оорег	ative Wa	y Suite 400				
			Addre	SS			
Herndo	on, VA	20171					
			City/State	and Zip Cod	e		
kr@bsa	alegalo	group.co	m				
E-ma	ail add	ress: (to	be used for	future annua	report notifi	ication)	
For fur	ther in	formation	on concernir	ng this matter,	please call:		
Kimber	ley Ro	eten			at (4364	980
		Name	of Person		Area Co	de & Day	time Telephone Number
	Regis Divis P.O.	ion of C Box 632	Section Corporations	5		Registr Division The Co 2415 N	address: ration Section on of Corporations entre of Tallahassee J. Monroe Street, Suite 810 assee, FL 32303
□\$25 F	Filing		🗆 \$30 Filin	he following g Fee & te of Status	amount: ☐ \$55 Filir Certified		☐ \$60 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION	I (1-4 must be completed)		ALLAHASS
1. Name of limited liability Company as it appears	s on the records of the Florida D	epartment of	Ar Ju
State: Stratcap Datasphere 7025 AC Skinner	Parkway, LLC		ASS ASS
Enter new principal office address, if applicable:			m <u>e</u> i ,
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)			STATE FLORIDA
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
2. The Florida document number of this limited lia	ability company is: M22000009	641	
Jurisdiction of its organization: Delaware			
4. Date authorized to do business in Florida: June	e 21, 2022		
SECTION II (5-9 complete only the applicable of			
5. New name of the limited liability company: RI (must	- '	y, LLC	
(must	t contain "Limited Liability Con	npany, ""L.L.C.," or "L	.T.C.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or mar must contain "Limited Liability Company," "L.L.C	naging members adopting the all		
6. If amending the registered agent and/or registere registered agent and/or the new registered office ac	ed officer address on our records ddress here:	s, enter the name of the n	<u>ew</u>
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida	Street Address	
	City	, Florida Zip Code	
	·	Zip Code	,
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agenthe provisions of all statutes relative to the proper and accept the obligations of my position as registed document is being filed to merely reflect a change this liability company has been notified in writing of the	nt and agree to act in this capac and complete performance of m ered agent as provided for in Ch in the registered office address,	y duties, and \widetilde{I} am familionapter 605, F.S. Or, if the	ar with

3

If Changing Registered Agent, Signature of New Registered Agent

8. If the amendment	changes person, title or capacity in acco	ordance with 605.0902 (1)(e), in	dicate that change:
Title/ Capacity	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Add
			□Remove
			DAdd
			□Remove
			□Add
			□Remove
			□Add

Signature of the authorized representative

Brian Alperstein

Typed or printed name of signee

Filing Fee: \$25.00

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF AMENDMENT OF "STRATCAP DATASPHERE

7025 AC SKINNER PARKWAY, LLC", CHANGING ITS NAME FROM "STRATCAP

DATASPHERE 7025 AC SKINNER PARKWAY, LLC" TO "RDC - 7025 AC

SKINNER PARKWAY, LLC", FILED IN THIS OFFICE ON THE TWENTY-FIRST

DAY OF JUNE, A.D. 2022, AT 3:35 O'CLOCK P.M.



Authentication: 203747349 Date: 06-23-22

6841857 8100 SR# 20222782298

State of Delaware
Secretary of State
Division of Corporations
Delivered 03:35 PM 06/21/2022
FILED 03:35 PM 06/21/2022
SR 20222782298 - File Number 6841857

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

as follows:		
and replace "1. Name." (the "Comp	(Name.) shall be deted with the following The name of the limit any") is: AC SKINNER PARKWAY,	g: ted liability company
IN WITNESS	WHEREOF, the undersigned	have executed this Certificate
IN WITNESS the 21	WHEREOF, the undersigned day of June	have executed this Certificate, A.D. 2022.

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "RDC - 7025 AC SKINNER PARKWAY, LLC" IS

DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF JUNE, A.D. 2022.

Authentication: 203747350

Date: 06-23-22