## M2300005632

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Business Entity Name)
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P: 866.625.0838 F: 866.625.0839

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Account#: I20000000088 If there are any issues please contact Patrice at 850-202-9071

Date:05/14/2024	
lame: Patrice Rush	
Reference #:	
Entity Name: COMPUTER DESIGN & INTEGRATION LLC	
☐ Articles of Incorporation/Authorization to Transact Business	
☐ Amendment	
✓ Change of Agent	
Reinstatement	
Conversion	
☐ Merger	
☐ Dissolution/Withdrawal	
☐ Fictitious Name	
Other	
Authorized Amount: \$25.00	
Signature:	

F: 800.944.6607



II5 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088 If there are any issues please contact Patrice at 850-202-9071

Date: 05	5/14/2024	
Name:	Patrice Rush	<del>-</del>
Reference #:	2334521	_
Entity Name:	COMPUTER DESIG	SN & INTEGRATION LLC
Articles of	of Incorporation/Authorization	to Transact Business
Amendm	ient	
Change     Ch	of Agent	
Reinstate	ement	
Conversi	ion	
☐ Merger		
Dissoluti	on/Withdrawal	
Fictitious	Name	
Other		
Authorized Amo	ount: \$25.00	
Signature:	(Pall	

## 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.

Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b)_	Mailing address of limited liability comp (Note: MAY BE POST OFFICE BO)	_
No Change		No Change	
April 27, 2023		M23000005632	
Date of filing/registration in Florida	4.	Document number	
NORTHWEST REGISTERED AGENT LLC	С		
Registered Agent and Registered Office shown on the records	of the Florida D	Dept. of State:	
7901 4th St N			
Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	<del></del>	
STE 300			
St. Petersburg	33702	<del></del>	
ot retereous	FI. <u>33702</u>	<del></del>	
COGENCY GLOBAL INC.			
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office addre	<u>ess:</u> 28	
		2024 MA	
115 North Calhoun St., Suite 4			7
NEW Registered Office Address:		<u> </u>	FILE
		<u> </u>	
Tallahassee	<sub>FL</sub> 32301		
Tallahassee  limited liability company is not organized under the nange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of t	of the registe Hiability comes of the limite	ered office and the business office of the re ipany, it is hereby confirmed that the chan- ed liability company or as otherwise provid-	g
s/ Mark J. Killian	ne mined na	Mark J. Killian	
nature of a member or authorized representative of a member		Printed or typed name of signee	
eby accept the appointment as registered agent and c	igree to act it	n this capacity. I further agree to comply once of my duties, and I am familiar with an apter 605. F.S. Or, if this document is bein firm that the limited liability company has	with d ac

Signature of Registered Agent