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(((H24000335061 3)))



H240003350613ABCY

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NRAI SERVICES, LLC

Account Number : 120080000104 : (302)674-4089

Phone : (302)674-5266 Fax Number

Enter the email address for this business entity to be used for future ! > annual report mailings. Enter only one email address please.

LLC REGISTERED AGENT CHANGE NETWORK PEOPLE, LLC

0
0
01
\$25.00

(((H24000335061 3)))

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.

l Na	me of the limited liability company: Network People,	LLC			
1, 144	incordio minor management of the contract of t	(b)			d liability company:
Z. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing add (<u>Note: M</u>	ress of limite IAY BE POS	d fiability company: TOFFICE BOX)
	13075 US HWY 19 N	1 (CORPORATE DR	UNIT G	
	CLEARWATER, FL 33764	CI	RANBURY, NJ 08	512	
		M2	4000001237		
	2/1/2024			nt number	
3.	Date of filing/registration in Florida	4.	Docume	nt tidinoe.	
5. (a)	Registered Agent and Registered Office shown on the records of				
()		the Florida Dep	t. of State:		
	CORPORATION SERVICE COMPANY				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)			
	1201 HAYS STREET				
	TALLAHASSEE, FI	33764			
	, []	L			
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> NRAI Services, Inc.	d Office addres	_		
	NEW Registered Office Address:				. .
	1200 South Pine Island Road				25
					
	Plantation , F	33324		.+ <u>-</u>	:. :0
If the	limited liability company is not organized under the la ange or changes are made, the Florida street address of	aws of the Stanf the register liability composition of the limite	ate of Florida, it is	confirmed	that the change(s
agent was/w the art	rere authorized by an affirmative vote of the memoers ticles of organization or the operating agreement of the	e minico nac	intij company.	•	
agent was/w the art		e limited liab Keith K	ahrs	or typed name	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00