## 

(Re	questor's Name)	
(Add	dress)	· · · · · · · · · · · · · · · · · · ·
(Ade	dress)	_
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
	_	
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	-iling Officer:	

Office Use Only





CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

		ACCOUNT	r no. :	I20000	000195			
		REFE	RENCE :	7	840740	4		
		AUTHORIZA	ATION :	SAK	inde man	,		
		COST I	IMIT :	\$ 35.0	,			
	<b>-</b>		. <b></b>					
ORDER	DATE :	April 5, 20	)23					
ORDER	TIME :	1:44 PM						
ORDER :	: . OM	640082-055						
CUSTOM	ER NO:	8407404						
	<b>-</b>		<b></b>	<del>.</del> <b>.</b>	. <b></b>			
CHANGE OF AGENT								
NAME: DIGISTREAM SOUTH FLORIDA, INC.								
PLEASE		THE FOLLOW	ING AS PI	ROOF OF	FILING:			
XX	<del>_</del>	STAMPED COE	γY					

EXAMINER:

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 6 nge is submitted for a corporation r to change its registered office on	n organized under the law	s of the State of	FL
1. The name of t	he corporation: DIGISTREAM SC	DUTH FLORIDA, INC.		
2. The principal	office address:			
3. The mailing a	ddress (if different):	· · ·		
4. Date of incorp	oration/qualification: 12/16/2009	9 Document n	umber: <u>P0900010</u>	00887
	street address of the current registment of State: (If resigned, enter	-	foffice on file with	the
	NORTHWEST REGISTERED	AGENT LLC.		
	7901 4TH STREET N, SUITE 3	300		20
	ST.PETERSBURG	FL	33702	2023 APR
6. The name and (if changed):	street address of the new register	/or registered offic	e	
	Corporation Service Company			A 09
	1201 Hays Street			· 5
		P.O. Box NOT acceptable		• •
	Tallahassee	FL_	32301	
The street addre	ss of its registered office and the be identical.	e street address of the bus	iness office of its r	registered agent.
Such change wa authorized by th	s authorized by resolution duly a e board, or the corporation has b	adopted by its board of di been notified in writing of	irectors or by an of f the change.	Ticer so
/S/ Jill Cilmi		Jill Cilmi, Vic	ce President	
Signatur	e of an officer or director	Printed	d or typed name and title	
I further agree t of my duties, and document is bein corporation has	the appointment as registered as ocomply with the provisions of a lam familiar with and accept a glied merely to reflect a chang been notified in writing of this case.	all statutes relative to the the obligation of mv posit ve in the revistered office	his capacity. Proper and compl tion as registered a address, I hereby	lete performance igent. Or, if this confirm that the
By: Drace	. CKuble	04/11/202	3	
Sign	ature of Registered Agent		Date	
If signing on bel	nalf of an entity:			
	Asst. Vice President	_		
Ту	ped or Printed Name			
	* * * FILI	NG FEE: \$35.00 * * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314