

P220000046013

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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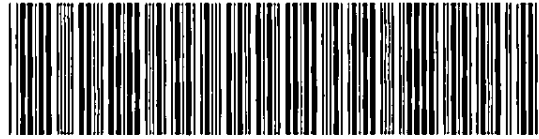
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 JUN 22 AM 10:40

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2022 JUN 22 PM 3:11

ALABAMA SECRETARY OF REVENUE
MONTGOMERY, AL 36103

A. RAMSEY
JUN 23 2022

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

Date: 06/22/2022

Acc#120160000072

mic

Name:	LIT COMMUNITIES BROADBAND, INC.
Document #:	
Order #:	14407800

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
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Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$

4375

Thank you!

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lit Communities Broadband, Inc.
Name of Corporation

DOCUMENT NUMBER: P22000046013

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melissa Childers
Name of Contact Person
Maynard, Cooper & Gale, P.C.
Firm/Company
1901 Sixth Avenue North, Suite 1700
Address
Birmingham, AL 35203
City/State and Zip Code
mchilders@maynardcooper.com

E-mail address: (to be used for future annual report notification) _____

For further information concerning this matter, please call:

Melissa Childers at (205) 488-3612
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Lit Communities Broadband, Inc.
2. The principal office address: 3500 Blue Lake Drive, Suite 225
Vestavia, AL 35243
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 06/09/2022 Document number: P22000046013
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Northwest Registered Agent LLC
7901 4 ST N
St. Petersburg, FL 33702

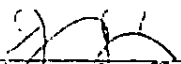
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

C T Corporation System
1200 South Pine Island Road
Plantation, Florida 33324
P.O. Box NOT acceptable

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CLERK OF COURT
JANET R. GIBSON
STATE OF FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.


Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Brian Snider, CEO
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

C T Corporation System

By: 
Signature of Registered Agent

6/22/2022
Date

If signing on behalf of an entity:

David Westcott, Assistant Secretary
Typed or Printed Name

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)