The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent			Date	
Authorize	ed Person(s) Detail :			
Title	AMBR	Title	AMBR	
Name	GONCALVES, JOAQUIM R	Name	LOJO, NICOLÁS AMICON FERNANDEZ	
Address	2800 SOUTH ORANGE BLOSSOM TRAIL SUITE J	Address	2800 SOUTH ORANGE BLOSSOM TRAIL SUITE J	

DOCUMENT# L17000173550

Entity Name: FIBERPRO NETWORK SERVICES, LLC

Current Principal Place of Business:

2800 SOUTH ORANGE BLOSSOM TRAIL SUITE J ORLANDO, FL 32805

Current Mailing Address:

2800 SOUTH ORANGE BLOSSOM TRAIL SUITE J ORLANDO, FL 32805 US

FEI Number: 82-2481565

Name and Address of Current Registered Agent:

GONCALVES, JOAQUIM R 2800 SOUTH ORANGE BLOSSOM TRAIL SUITE J ORLANDO, FL 32805 US

City-State-Zip: ORLANDO FL 32805

that my name appears above, or on an attachment with all other like empowered. SIGNATURE: JOAQUIM GONCALVES CEO

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 20, 2023 Secretary of State 4976058248CC

Certificate of Status Desired: Yes

City-State-Zip: ORLANDO FL 32805

Date