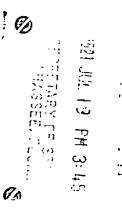
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(C	ity/State/Zip/Phone	· #)	
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Office Use Only



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2021 JUL 19 AH 9: 03

RAROCHT

JUL 20 7021 I ALBRITTON CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 906323 8350387

AUTHORIZATION : Spelle Bas

COST LIMIT : '\$ 35.00

\_\_\_\_\_\_

ORDER DATE : July 15, 2021

ORDER TIME : 2:39 PM

ORDER NO. : 906323-005

CUSTOMER NO: 8350387

\_\_\_\_\_

CHANGE OF AGENT

NAME: STRATEGIC GOVERNMENT

RESOURCES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 617.050 mge is submitted for a corporation orga or to change its registered office or regist	nized under the laws of the State of $\dot{\mathbb{L}}$	TX
1. The name of	the corporation: STRATEGIC GOVERNI	MENT RESOURCES, INC.	
2. The principal	office address: 1117 BOURLAND RD, F	(eller, 1 \ 70240	
3. The mailing a	nddress (if different): PO Box 1642, Kelle	er, TX 76244	
4. Date of incorp	poration/qualification: 01/31/2013	Document number: F130000	00477
	d street address of the current registered a rtment of State: (If resigned, enter resign	-	h the
	CT CORPORATION SYSTEM		
1200 SOUTH PINE ISLAND ROAD			
	PLANTATION, FL 33324		2021
6. The name and (if changed):	d street address of the new registered age	nt (if changed) and /or registered offi	9
	Corporation Service Company		<b>=</b> ;
	1201 Hays Street		AH 9: 03
	P,O, Bo	v NOT acceptable	ယ
	Tallahassee	FL 32301	
The street addre	ess of its registered office and the street be identical.	address of the business office of its	registered agent,
Such change wa authorized by th	ns authorized by resolution duly adopted the board, or the corporation has been no	d by its board of directors or by an optified in writing of the change.	officer so
$\searrow$	xie E. Cienie	Jill Cilmi, Vice President	
Signatu	re of an officer or director	Printed or typed name and titl	e
l further agree i of my duties, an document is bei corporation has	the appointment as registered agent and comply with the provisions of all stated I am familiar with and accept the obling filed merely to reflect a change in the been notified in writing of this change in Service Company	utes relative to the proper and com ligation of my position as registered be revistered office address. I hereb	plete performance agent. Or, if this v confirm that the
By: <u>Х</u>	Juace 2-Kulby nature of Registered Agent	07/19/2021	
_		Date	
If signing on be	half of an entity:		
<u> </u>	Asst. Vice President		
13	yped or Printed Name	CD C3500 + + +	
	* * * FILING FE	LE: 335.00 * * *	

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