## F13000003997

(Requestor's Name)
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☐ PICK-UP ☐ WAII ☐ MAIL
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Certified Copies Certificates of Status
Special Instructions to Filing Officer
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12/12/2017

115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM-

Account#: I20000000088

Date:12/12	<u> </u>	
Name: Merrit	Knickle	
Reference #:	C020856	
Entity Name:	ALIANZA (DE), INC.	-
Articles of Incor	poration/Authorization to Transact Busines	s DEC
Amendment		DEC 1
☑ Change of Age	t	12 PA
Reinstatement	l	ન દુ: ભ
☐ Conversion		الله الله الله الله الله الله الله الله
Merger		
☐ Dissolution/With	drawat	
☐ Fictitous Name		
Other		
	<del> </del>	· ·
Authorized Amount:		
Signature:	<u>                                     </u>	
© CORPORATE HQ COGENCY GLOBAL INC. IC E 40 - 51, 10 1 FL NY, NY 10016 800,221,0102 +1,212,947,7200	@EUROPEAN HQ COGENCY GLOBAL (UK) LIMITED REGISTERD INFINIAND AWALES REGISTER HOLDED 6 BEVIS MARKS, INFIL LONDON ECJA 78A +44 (0120.3786.1090	● ASIA PACIFIC HQ  COGENCY GLOBAL (HK) HMITED A HOLG HOLG I WIFED COMPANY INFINITUS PEA/A, 1211 FI  199 DES VOEUX RD CENTRAL HONG KONG +852,3975,1803



115 N CALHOUN ST., STE, 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

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

statement of change is submitted for a co in order to change its registered	rporation organizea Loffice or registered	agent, or both, in the S	tate of <u></u> tate of Florida.	1	
				INC	
	oration: ALIANZA (DE), INC.				
2. The principal office address:					
333 SOUTH 520 WES	T, #350	Lindon	UT	840	
3. The mailing address (if different):					
333 SOUTH 520 WEST		Lindon	UT	84	
4. Date of incorporation/qualification: <b>S</b>	eptember 17, 2013	3 Document number: _	F13000	00399	
5. The name and street address of the cur Florida Department of State: (If resign		t and registered office o	n file with the		
• 1	-	CE COMPANY	,		
<del></del>	201 HAYS ST		<del></del>		
				احم:	
TALLAH	ASSEE, FL	32301-2525			
6. The name and street address of the new	w registered agent (i	f changed) and /or regis	tered office	MAI DEC 12	
(if changed):	N ODAL INC				
COGENCY G	LOBAL INC	<u>,                                      </u>	<del></del>	=	
115 North Ca	ılhoun St., S	uite 4		•	
Tollohassas	P.O. Box NOT acce	ptable			
<u>Tallahassee,</u>			<del></del>		
The street address of its registered offic as changed will be identical.					
Such change was authorized by resoluti authorized by the board or the corporat	on duly adopted by tion has been notifie	its board of directors or ed in writing of the char	r by an officer s nge.	50	
		Brian Beutler			
Signification officer of director  [] I hereby accept the appointment as reg. I further agree to comply with the provi performance of my duties, and I am fan agent. Or, if this document is being file hereby confirm that the corporation ha	isions of all statutes	relative to the proper of my	city. and complete position as rea	istered ess, I	
/S/ Tim Mayville		December 1	2, 2017		
Signature of Registered Agent		Date		-	
If signing on behalf of an entity:					
Mayville, Assistant Secr	etary				
Typed or Printed Name					
	* * FILING FEE: :				
Make checks f Mail to: Division of Co	PAYABLE TO FLORID	DA DEPARTMENT OF STA	ATE ce fi 32314		