F98000000033

(R	equestor's Name)			
(Address)				
(Address)				
(C	ity/State/Zip/Phone	#)		
PICK-UP	WAIT	MAIL.		
(Business Entity Name)				
(Document Number)				
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TALLAHASSIF OF ORIDA

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	06/14/2019	
Name:	Joy Weaver	-
Reference #	1095907	_
Entity Name	TECHNOLOGY PLUS, INC. DBA	TECHNOLOGY PLUS OF KANSAS, INC.
☐ Artic	les of Incorporation/Authorization	to Transact Business
Ame	ndment	
√ Char	nge of Agent	
☐ Rein	statement	
Conv	version	
☐ Merg	ger	
Disse	olution/Withdrawal	
☐ Fictit	ious Name	
Othe	r	
Authorized : Signature: _	Amount:\$35.00	

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

statement of cha	nge is submitted for a corporatio	517.0502, 607.1508, or 617.1508, Fl n organized under the laws of the Sto r registered agent, or both, in the Sto	ate of Kansas
		INOLOGY PLUS OF K	
2. The principal	office address: 300 E	John Carpenter frug	, Svite 700
Tring	Tx 75062	<u> </u>	
3. The mailing a	ddress (if different): P.O. B	John Carpenter frug 0x 619820, Dal	161 Tx 75261-
4. Date of incorp	poration/qualification: Januar	y 2, 1998 Document number:	F9800000033
	street address of the current regit tment of State: (If resigned, enter	stered agent and registered office on resigned)	file with the
	CAPITOL CORPO	RATE SERVICES, INC	<u>. </u>
-	515 EAST PAR	RK AVENUE, 2ND FL	
	TALLAHAS	SSEE, FL 32301	2919
6. The name and (if changed):		red agent (if changed) and /or registe	
	COGENCY GLOB	AL INC.	
	115 North Calhour		
	Tallahassee, FL	Box NOT acceptable	, 5
The street addre	ss of its registered office and the be identical.	e street address of the business offic	e of its registered agent,
Such change wa authorized by th	s authorized by resolution duly a board, or the corporation has be	adopted by its board of directors or been notified in writing of the chang	by an officer so te.
•	e of an officer or director	MICHAEL FOLLY SCERE	e and tille
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered a o comply with the provisions of my duties, and I am familiar wit s document is being filed merely that the corporation has been no	gent and agree to act in this capacit all statutes relative to the proper a h and accept the obligation of my po to reflect a change in the registere otified in writing of this change.	ty. id complete osition as registered d office address, I
1)		. 6/14/2019	
Sign	nations of Registered Agent	Date	

If signing on behalf of an entity:

Tim Mayville, Assistant Secretary Typed or Printed Name

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