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Account#: 120000000088

Date:5/17/18	Account#. 120000000	
Name: KEN HOWELL		
Reference #: C021978	<u></u>	
Entity Name: QUANTUMSHIFT Co	OMMUNICATIONS, INC.	
Articles of Incorporation/Authoriz	zation to Transact Business	
Amendment		
✓ Change of Agent		
Reinstatement		
Conversion	ISSUES - CALL KEN @ 518-213-0738	
Merger		
☐ Dissolution/Withdrawal		
Fictitous Name		
Other		
Authorized Amount: \$35.0 Signature:	00	

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

statement of chai	provisions of sections 607.0502, 617.0502, 6 nge is submitted for a corporation organized to change its registered office or registered	d under the laws of the State	$_{e\ of}$ Califor		
1. The name of the	he corporation: QUANTUMSE	HIFT COMMUNIC	ATIONS,	INC.	
2. The principal of 12657	office address:	SAN RAMON	CA	94583	
_	ddress (if different):	SAN RAMON	CA	94583	
_	oration/qualification: May 21, 1999		F9900000	<u> </u>	
	street address of the current registered ager tment of State: (If resigned, enter resigned)	nt and registered office on fi	le with the		
	NRAI SERVICE	ES, INC			
1200 South Pine Island Road					
	Plantation, FL	33324	SECE FALL	22 2	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registere	RETARY AHASSE	TINY 17	
	COGENCY GLOBAL INC	D	0F S 	A U	
	115 North Calhoun St., S		TATE ORIOA	9: 2 4	
	Tallahassee, FL 32301				
The street addre	ss of its registered office and the street add be identical.	dress of the business office	of its registere	d agent,	
Such change wa authorized by th	s authorized by resolution duly adopted by e board, or the corporation has been notified	its board of directors or by ed in writing of the change	y an officer so		
	ina Brown Ju	enna Brown, Director,		\ffairs	
I hereby accept I further agree to performance of agent. Or, if thi	the appointment as registered agent and a o comply with the provisions of all statute my duties, and I am familiar with and acce is document is being filed merely to reflect that the corporation has been notified in w	gree to act in this capacity relative to the proper and opt the obligation of my pos a change in the registered		ered . I	
/S/ Tim N	Mayville	5-8-18			
	half of an entity:	Date			

Tim Mayville, Assistant Secretary

Typed or Printed Name

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