

P04000113298

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

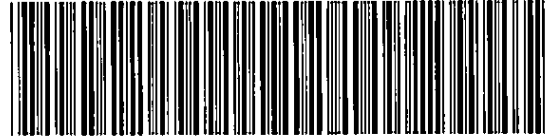
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2022 AUG 18 AM 8:54

SECRETARY OF STATE  
TALLAHASSEE, FL

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2022 AUG 18 AM 11:58

AMBASSADOR

A. BUTLER

AUG 19 2022



Account#: 120000000088

Entity Name: **CERTIPAY HOLDING CO., INC.**

- ☐ Articles of Incorporation/Authorization to Transact Business  
☐ Amendment  
☒ Change of Agent  
☐ Reinstatement  
☐ Conversion  
☐ Merger  
☐ Dissolution/Withdrawal  
☐ Fictitious Name  
☐ Other

**ISSUES? CALL**  
**David:**  
**850-270-0082**

Signature: David Shulman

• **ASIA PACIFIC HQ**  
COCENCY GLOBAL LTD LIMITED  
14010 US PLACE 10TH FL  
156 DES MOINES RD CENTRAL  
HONG KONG  
+852 3975 1803

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CERTIPAY HOLDING CO., INC.
2. The principal office address: 2600 W. Geronimo Place, Suite 100, Chandler, AZ 85224
3. The mailing address (if different): 2600 W. Geronimo Place, Suite 100, Chandler, AZ 85224
4. Date of incorporation/qualification: 7/29/2004 Document number: P04000113298
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

RUGGIERI, MARK J

130 BATES AVE SW SUITE 101

WINTER HAVEN, FL 33880

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

COGENCY GLOBAL INC.

115 North Calhoun St., Suite 4

P.O. Box NOT acceptable

Tallahassee, FL 32301

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TALLAHASSEE, FL

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

/s/ Kara Childress

Signature of an officer or director

Kara Childress CFO

Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

/s/ Tim Mayville

Signature of Registered Agent

8/18/2022

Date

If signing on behalf of an entity:

Tim Mayville, Assistant Secretary

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)