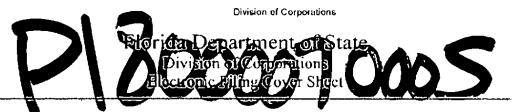
8/29/2019



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## REGISTERED AGENT CHANGE ASK SAFETY INC.

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ς.

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

) 73	the corporation: ASK SAFETY INC.		
2. The principal	I office address: 7208 W. SAND LAKE R	OAD, SUITE 305, ORLANDO, FL 32819	
3. The mailing of			
4. Date of incor	rporation/qualification: 03/15/2018	Document number: 191800007000)5	
5. The name and		against and maintained office on file with the	201
	BJORG EIKELAND, ESQ.		9 <b>A</b> {
	THE CRANDON BOULEVARD, APT.	A108	2019 AUG 29
	KEY BISCAYNE, FL 33149		
6. The name and (if changed):	d street address of the new registered ago	ent (if changed) and /or registered office	AH II: 02
	C T Corporation System		v
	c/o C T Corporation System, 1200 South	Pine Island Road	
	P.O. Box NO Plantation, Florida 33324	Taccepuble	
The street address changed will	ess of its registered office and the street	address of the business office of its registered agen	ıt,
		d by its board of directors or by an officer so ottlied in writing of the change.	
Stack	ure of an officer of diffector	STAALE BRUNGOT, PRESIDENT	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	-	Frinted or typed name and title and agree to act in this capacity. tates relative to the proper and complete accept the obligation of my position as registered lect a change in the registered office address, I in writing of this change.  8/29/19	
	Service of regulation regular	Date	
	chalf of an entity:		
Michele Lama	gna, Assistant Secretary  yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)