The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROBERT REED 01/19/2020
Electronic Signature of Registered Agent

Officer/Director Detail:
Title   VP
Name    ELIZABETH, VANACKER
Address 6417 N PENN AVE
City-State-Zip NICHOLS HILLS OK 73116

Title   PRES
Name    FOLSOM, ANNE
Address 754 DUPARC CIR
City-State-Zip: TALLAHASSEE FL 32312

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELIZABETH VANACKER 01/19/2020
CEO
Electronic Signature of Signing Officer/Director Detail