**Entity Name:** BULLIPATROL, INC.

**Current Principal Place of Business:**
301 W PLATT ST
STE155
TAMPA, FL 33606

**Current Mailing Address:**
301 W PLATT ST
STE155
TAMPA, FL 33606 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**
AEGIS LAW
100 S ASHLEY DR
STE. 620
TAMPA, FL 33602 US

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:**

Electronic Signature of Registered Agent

**Date**

**Officer/Director Detail:**

<table>
<thead>
<tr>
<th>Title</th>
<th>Name</th>
<th>Address</th>
<th>City-State-Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td>P, S</td>
<td>GRUBBS, ANDREW</td>
<td>301 W PLATT ST</td>
<td>TAMPA FL 33606</td>
</tr>
<tr>
<td>VP</td>
<td>MOOK, ALLISON</td>
<td>216 RONJA LN</td>
<td>VALRICO FL 33594</td>
</tr>
</tbody>
</table>

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:** ANDREW GRUBBS

**PRESIDENT**

**04/11/2019**