

303573

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

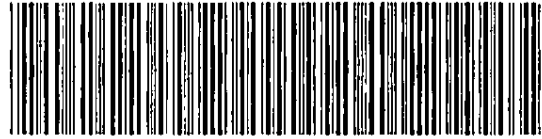
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600387195836

FILED

2022 JUN 30 AM 9:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

2022 JUN 30 AM 11:46

TALLAHASSEE, FLORIDA

JUL - 1 2022

S. PRATHER

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 778845 8287056

AUTHORIZATION :

COST LIMIT : \$35.00

ORDER DATE : June 29, 2022

ORDER TIME : 4:39 PM

ORDER NO. : 778845-005

CUSTOMER NO: 8287056

CHANGE OF AGENT

NAME: FORENSIC ANALYSIS &
ENGINEERING CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: _____

**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: FORENSIC ANALYSIS & ENGINEERING CORPORATION
2. The principal office address: 2503 58th Street, Suite-A, Hampton, VA 23661
3. The mailing address (if different): _____
4. Date of incorporation/qualification: March 31, 1966 Document number: 303573
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)

118 SE 44th Street

Cape Coral

FL 33904

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

1201 Hays Street

P.O. Box NOT acceptable

Tallahassee

FL 32301

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.

Meagan McBride
(Signature of an officer or director)

(Signature) of an officer or director

Meagan McBride

Vice President

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.

Corporation Service Company

By: Lindsey M Basone

Signature of Registered Agent

Lindsey M. Baronic, Assistant Vice President

06/29/2022

Date _____

If signing on behalf of an entity:

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 (04/13)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 JUN 30 AM 9:31

FILED