

Florida Department of State

Division of Corporations
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To:

Division of Corporations

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From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639 LIART OF STATE

SECRETARY OF STATE

REGISTERED AGENT CHANGE

EQUITRAC CORPORATION

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

Pursuant to the provisions of section 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 is order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of	the corporation is: Equitrac Corporat	ion	
	office address: 1000 SOUTH PINE ON FL 33324	ISLAND RD. SUITE 900	
PLANTATI	UN FL 33324		700
3. The mailing a	address (if different):	· · · · · · · · · · · · · · · · · · ·	<u> </u>
4. Date of incor	poration/qualification: 1/12/19	78 Document Number:	S 565238
5. The name and Florida Depart	d street address of the current register rtment of State:	red agent and registered office	on file with the
	NRAI SERVICES, INC.		95
	2731 EXECUTIVE PARK DRIVE	SUITE 4	36 36
	WESTON FL 33331		
6. The name and (if changed):	d street address of the new registered	agent (if changed) and /or reg	pistered office
	Corporate Creations Network Inc.	·	
	11380 Prosperity Farms Road #221	E	
	(P.O. Box Not accepted the Palm Beach Gardens FL 33410	table)	
agent, as change	ess of its registered office and the sed will be identical. as authorized by resolution duly ad		Ū
authorized by the	ne board, or the corporation has been	notified in writing of the chan	gc.
Stonat	ure of an officer or director)	by S. Simons as attorney-in-fa (Printed or Typed re	oct
I hereby accept I further agree performance of agent. Or, if th	the appointment as registered agent to comply with the provisions of my duties, and I am familiar with an is document is being filed merely to that the corporation has been notified	and agree to act in this capac all statutes relative to the p d accept the obligation of my reflect a change in the regist	ity. proper and complete position as registered
ZJUHUHUHA	ture of Registered Agent)	10/01/	
` -	half of an entity:	(Da	te)
Samantha Simon	ns, Special Secretary d or Printed Name)		
	MAKE CHECKS PAYABLE TO	O FLORIDA DEPARTMENT OF	STATE

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

Corporate Creations International Inc. 11380 Prosperity Farms Road #221E Palm Beach Gardens FL 33410 (561) 694-8107