847263

(Requestor's Name) (Address)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.		:	12000000	00195			
			REFERENCE	;	365998	5057638		
			AUTHORIZATION	Ì	pulle	NO AD .		
			COST LIMIT	ن _: (\$ 3'5.00	man		
								. –
ORDER	DATE	:	January 7, 2022					
ORDER	TIME	:	2:23 PM					
ADDDDD	110							

ORDER NO. : 365998-018

CUSTOMER NO: 5057638

CHANGE OF AGENT

.

NAME: AVNET, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS:

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 <u>New York</u> ______ in order to change its registered office or registered agent, or both, in the State of Florida.

1.	The name	of the	corporation:	AVNET,	INC.
			· · · · F · · · · · · · · · · ·		

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2. The principal office address: 2211 S. 47th Street, Phoenix, AZ 85034

The mailing address (if different): _____

4. Date of incorporation/qualification: 10/20/1980 Document number: 847263

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)

C T Corporation System		
1200 South Pine Island Road		
Plantation	FL	33324

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

	Corporation Service Company		_		
	1201 Hays Street			20	
	P.O. Box NOT acceptable			čib	
	Tallahassee	FL 32301	 ایس میں		
Such change authorized by	was authorized by resolution duly a the board, or the corporation has b the C COVE	e street address of the business office of in adopted by its board of directors or by an been notified in writing of the change. Jill Cilmi, Vice Preisdent	(n < -	d agent, M C: 38	Ìm D
I hereby auce I further agre of my duties, document is b corporation h	ature of an officer of director pt the appointment as registered ag te to comply with the provisions of and I am familiar with and accept to being filed merely to reflect a change tas been notified in writing of this co on Service Company	Printed or typed name and to gent and agree to act in this capacity. all statutes relative to the proper and con the obligation of my position as registered office address, I herei change.		rmanco r, if this that the	e 5 2
By:	WM Ley	01/11/2022			

Signature of Registered Agent

If signing on behalf of an entity:

Ami M. Casper, Asst. Vice President

Typed or Printed Name

* * * FILING FEE: \$35.00 * * *

Date

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)