856767

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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Special Instructions to Filing Officer:				

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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Baronie lindsey.baronie@cscglobal.com

Date: November 16, 2018

Order#: 471998-328

Re: TRANSLOGIC CORPORATION

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

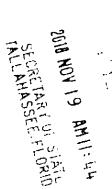
Attn: Lindsey Baronie c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA



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

statement of ch	ange is submitted for a corporate	?, 617.0502, 607.1508, or 617.1508, Florida : ion organized under the laws of the State of _ or registered agent, or both, in the State of I	DE
1. The name of	the corporation: TRANSLOGIC	CORP.	
	l office address: 10825 East 47th		
3. The mailing	address (if different): 10825 Eas	st 47th Avenue, Attn: Tax Department, Denv	/er, CO 80239
4. Date of incor	poration/qualification: 06/14/19	983 Document number: 856767	1-
	d street address of the current repartment of State: (If resigned, enti-	gistered agent and registered office on file were resigned)	ith the
	NRAI Services, Inc.		
	1200 South Pine Island Road		
	Plantation	FL 33324	
6. The name an (if changed):		tered agent (if changed) and /or registered of	2018 NOV 19 SECRETARY TALLAHASS
	Corporation Service Company	<i>y</i>	19 ASSI
	1201 Hays Street		AH II: 44 EE. FLORID
	Tallahassee	O Box NOT acceptable FL 32301	OR H
773			e+
as changed will	l be identical.	he street address of the business office of its	s registered agent.
Such change wauthorized by t	as authorized by resolution duly he board, or the corporation has	y adopted by its board of directors or by an established in writing of the change.	officer so
	e E Conie	Jill Cilmi	Vice President
I hereby accept I further agree performance of agent. Or, if the hereby confirm Corporation	ure of an officet of director I the appointment as registered to comply with the provisions of f my duties, and I am familiar with its document is being filed mere that the corporation has been to on Service Company	Printed or typed name and total agent and agree to act in this capacity, of all statutes relative to the proper and compath and accept the obligation of my position ely to reflect a change in the registered office notified in writing of this change.	
By: Jun	down M Baronia gnature of Registered Agent	11/13/2018	
	chalf of an entity:	** ***	
Lindsey M. Bar	ronie, Asst. Vice President		
Т	Typed or Printed Name	_	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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