## FC/00000586

(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	



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2023 JAH -9 AH 9: 29

RECEIVED

A. BUTLER

JAN 10 2023

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500
ACCOUNT NO. : I2000000195
REFERENCE : 336071 8398316
AUTHORIZATION : Spiels le man
COST LIMIT : 35.00
ORDER DATE : January 9, 2023
ORDER TIME : 1:22 PM
ORDER NO. : 336071-006
CUSTOMER NO: 8398316
CHANGE OF AGENT
NAME: SOLO W-2, INC.
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Eyliena Baker
EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

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

statement of char	ige is submitte	ections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sta d for a corporation organized under the laws of the State of $\frac{C_0}{2}$	ALIFO			
in order	to change its	registered office or registered agent, or both, in the State of Flo	rida.			
1. The name of the	ne corporation	SOLO W-2, INC.			_	
2. The principal office address:		3478 BUSKIRK AVENUE SUITE 1000				
PLEASANT HIL	L, CA 94523					
3. The mailing ac	ddress (if diffe	ent):				
4. Date of incorporation/qualifi		pation: 01/30/2001 Document number: F0100000	0586			
		of the current registered agent and registered office on file with (If resigned, enter resigned)	the			
	BUSINESS F	ILINGS INCORPORATED				
	1200 SOUTH	PINE ISLAND ROAD				
	PLANTATION	FL 33324	= : :	2023 JAH		
6. The name and (if changed):	street address	of the new registered agent (if changed) and /or registered offic	e	JAH -9	,	
	Corporation S	ervice Company	- 11 - 140	<u> </u>	, , ,	
	1201 Hays St	reet		9 9	10+	
•		P.O Box NOT acceptable	7 773	9		
	Tallahassee	FL 32301				
The street address as changed will	ss of its registe be identical.	red office and the street address of the business office of its	registe	red age	ent,	
Such change was authorized by the	s authorized by e board, or the	resolution duly adopted by its board of directors or by an of corporation has been notified in writing of the change.	lficer s	Ю		
Xee E	, QQn	Jill Cilmi, Vice President			_	
Thereby accept to a function of the function o	o comply with II am familian Ig filed merely been notified	nt as registered agent and agree to act in this capacity, the provisions of all statutes relative to the proper and comp with and accept the obligation of my position as registered of to reflect a change in the registered office address, I hereby in writing of this change.	lete ne	rforma Or, if m that	nice this the	
By: L)	Jeg Zo	01/09/2023				
	ature of Registered	\				
If signing on beh						
Grace E. Kirby,		<del>-</del>				
ТУ	ped or Printed Nam					
		* * * 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)