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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
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ified Copies	Certificates	of Status
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ecial Instructions to	Filing Officer:	

Office Use Only



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2021 JAN 20 AM 11: 20 SECRETARY OF STATE



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: January 18, 2021

Order#: 616982-011

Re: QUANTUM SPATIAL, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX ___ File in your office on a routine basis.

____ Issue Proof of Filing.

XX____ Please return evidence to the following:

Attn: Erika Zavala Daza 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 char	provisions of sections 607,0502, 61 age is submitted for a corporation to change its registered office or	organized under the law	s of the State of $\underline{}$	WI	'iis 	_
1. The name of ti	he corporation: QUANTUM SPATI	AL, INC.				
	office address: N 6216 Resource I		WI 53085	· · ·		<u> </u>
3. The mailing a	ddress (if different): 523 Wellingto	n Way Lexington, KY 40	0503-1394			-
	oration/qualification: 03/12/2001			01401		_
	street address of the current regist ment of State: (If resigned, enter r		d office on file wit	th the		
	C T CORPORATION SYSTEM			#1 038	2021	
	1200 SOUTH PINE ISLAND RO	AD		RETA	2021 JAH 20	
	PLANTATION, FL 33324			AS AS		1
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office			OF STAIL	AM 11: 20	Ö
	Corporation Service Company					
	1201 Hays Street					
	P.O. Box NOT acceptable			•		
	Tallahassee	FL	32301			
	ss of its registered office and the be identical.					ıt.
	s authorized by resolution duly ac e board, or the corporation has be	dopted by its board of d een notified in writing o	irectors or by an of the change.	officer so)	
Q.l	I Son	Richard Tong, V	ice President			
I further agree to of my duties, and document is bein corporation has	the appointment as registered age to comply with the provisions of a d I am familiar with and accept the ng filed merely to reflect a change been notified in writing of this ch Service Company	ent and agree to act in t	d or typed name and titl his capacity, e proper and com tion as registered e address, I hereb		forman Or if ti 1 that t	- his he
By: Din	ce thinby	01/18/2	2021			_
Sign If signing on bel	nalf of an entity:		Date			
Grace E. Kirby, A	Assistant Vice President					
	ped or Printed Name					

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