Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

: BUSINESS FILINGS Account Name Account Number : 105256001620 Phone : (608)827-5300 Fax Number : (608)827-5501

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

REGISTERED AGENT CHANGE ENCHOICE, INC.

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Electronic Filing Menu

Corporate Filing Menu

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SIAIEN	BOTH FOR CORPORATIONS	DAGENTOR &
Pursuant to the	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florid	da Siatutes Mit
	range is submitted for a corporation organized under the laws of the State	
	ler to change its registered office or registered agent, or both, in the State of	of Florida
	Protott inc	mg. Z
	the corporation: ENCHOICE, INC.	7.5
2. The principal	d office address: 1400 E Southern Ave Ste 800, Tempe, Arizona 85282	
3. The mailing s	address (if different):	
4. Date of incorp	rporation/qualification: 11/20/2002 Document number: F0200	00005799
5. The name and Florida Depar	id street address of the current registered agent and registered office on file utment of State: (If resigned, enter resigned)	with the
	CORPORATION SERVICE COMPANY	
	1201 HAYS STREET	
	TALLAHASSEE, Ft. 32301	
6. The name and (if changed):	d street address of the new registered agent (if changed) and for registered	office
	Business Filings Incorporated	
	1200 South Pine Island Road	
	P.O. Box. NOT acceptable	
	Plantation, Florida 33324	- Maria
The street address changed will	ess of its registered office and the street address of the business office of i be identical.	its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by a he board, or the corporation has been notified in writing of the change.	n officer so
A an	DASMIS DITALLO, SECRETAR	Ý
, , ,	ur of an officer ev director Printed or typed manic had	fille
I hereby accept I fiarther agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agont and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and communities, and I am familiar with and accept the obligation of my position is document is being filed merely to reflect a change in the registered of that the corporation has been notified in writing of this change.	omplete on as registered ñce address, l
Natil	5th day of November, 2018	
Sign	5th day of November, 2018 mature of Regustered Agent Date	
lf signing on bel	chalf of an entity:	
Mark Williams, A	N VP	
Ту	ypod or Printed Name	
	* * * FILING FEE: \$35.00 * * *	
1.5	MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE	32314

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