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## Sunshine State Corporate Compliance Company

## 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 10/12/2021			<i>⇔WALK I</i> N⇔
ENTITY NAME AMERIC	CAN ENDINEERING TE	ESTING	
DOCUMENT NUMBER_	-03000006443		
	**PLEASE FILE THE A	TTACHED AND RETURN**	
xxxx	Plain Copy		
	Certified Copy Certificate of Status		
***		OWING FOR THE ABOVE ENTITY**	
	Certified Copy of Arts & Certificate of Good Standing		
	**APOSTILLE' / NOT	TARIAL CERTIFICATION**	
COUNTRY OF DESTINAT NUMBER OF CERTIFICAT			_
TOTAL OWED \$35.00		ACCOUNT #: 1201600000	72
Please call Tina at th	e above number for any	issues or concerns. Thank you	so mach!

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statute a organized under the laws of the State of <mark>Minnes</mark> registered agent, or both, in the State of Florida	sota
1. The name of t	the corporation: AMERICAN ENG	INEERING TESTING, INC.	
	office address: 550 CLEVELAND		
3. The mailing a	ddress (if different):		
		Document number: F03000006443	
	street address of the current regis	stered agent and registered office on file with the resigned)	
	BUSINESS FILINGS INCORPOR	ATED of	22
	1200 South Pine Island Road	Ticone Andre	30 IZI
	Plantation, FL 33324		
6. The name and (if changed):	l street address of the new register	ed agent (if changed) and /or registered office:	
	Registered Agents Inc.	177 ( W	29
	7901 4th St N STE 300		
	St. Petersburg FL 33702	P.O. Box NOT acceptable	
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its regis	stered agent,
Such change wa authorized by th	as authorized by resolution duly a ne board, or the corporation has b	adopted by its board of directors or by an office seen notified in writing of the change.	er so
Ker 111	ha	Kate Marcotte	
Signatu I hereby accept I further agree : of my duties, an document is bei corporation has	to of an officer or director  the appointment as registered ag to comply with the provisions of a d I am familiar with and accept t ing filed merely to reflect a chang s been notified in writing of this a	Printed or typed name and title gent and agree to act in this capacity, all statutes relative to the proper and complete the obligation of my position as registered agence in the registered office address, I hereby conhange.	performance it. Or, if this firm that the
Piec I	nature of Registered Agent	10/11/2021	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Bill Havre	· · · · · · · · · · · · · · · · · · ·	-	
Т	yped or Printed Name		

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