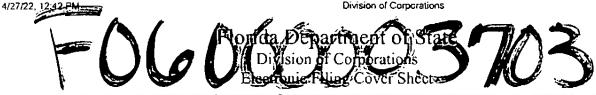
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000152263 3)))



H220001522633ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : URS AGENTS LLC Account Number : I20150000127 Phone : (800)567-4397

: (800)567-4398 Fax Number

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

Email Address:\_

## REGISTERED AGENT CHANGE WORLD SOURCE INTEGRATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

A. BUTLER
APR 28 2022

Electronic Filing Menu

Corporate Filing Menu

Help

2022-04-27 18:51:50 GMT

17702346196

From: Kimberly Rogers

## **COVER LETTER**

(((H22000152263 3)))

TO: Amendment Section Division of Corporations		
Bivision of Corporateria		
SUBJECT: World Source Integration, Inc		
Name of Corporation		
DOCUMENT NUMBER: F06000003703		
The enclosed Statement of Change of Registered O	ffice/Agent and fee	are submitted for filing.
Please return all correspondence concerning this ma	atter to the following	ng:
		.0.
Ben S Wilson		
Name of Contact Person	·-·-	
World Source Integration, Inc		
Firm/Company		
2200 Arbor Tech Drive		
Address		
Hebron KY, 41048		
City/State and Zip Code	<del></del>	
ben.wilson@hy-tek.com		
E-mail address: (to be used for future annual re	port notification)	
	•	
For further information concerning this matter, plea	se call:	
Georgina Vega-	at ( 800	567-4397
Name of Contact Person		e & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

CR2E045 (04/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS (((H22000152263 3)))

statement of che	provisions of sections 607.0502, 617.050 mge is submitted for a corporation organ er to change its registered office or regist	nized under the laws of the State of	Illinois	this	_
I. The name of	the corporation: World Source Integration	, Inc			
	office address: 1201 N. Raddant Road				<del></del>
3. The mailing a	nddress (if different):				<del></del>
4. Date of incorp	poration/qualification: 5/24/2006	ocument number: F060000	003703		
	d street address of the current registered a treet of State: (If resigned, enter resigned		vith the		
	NRAI Services, Inc				
	1200 South Pine Island Road		 	202	
	Plantation, FL 33324		ALL	2022 APR 27	""]
6. The name and (if changed):	I street address of the new registered ager	nt (if changed) and /or registered o	NARY OF	₹ 27 AH	
	URS Agents, LLC		(H)	9: 30	
	3458 Lakeshore Drive		TAK	30	
	P.O. Box Tallahassee, FL 32312	x NOT acceptable	 		
The street addre	ess of its registered office and the street be identical.	address of the business office of i	its register	red age	nt,
Such change wa authorized by th	is authorized by resolution duly adopted to board, or the corporation has been no	d by its board of directors or by ar tified in writing of the change.	n officer s	0	
Ben A.V	Villoni e of an officer or director	Ben S Wilson- Secretary	iille	_	_
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered agent am to comply with the provisions of all state of I am familiar with and accept the obling the filed merely to reflect a change in the been negitied in writing of this change.	d agree to act in this capacity. utes relative to the proper and con igation of my position as registere e registered office address, I here	mplete per ed agent. by confiri	rforma Or, if t m that t	nce his he
94	da de la companya dela companya dela companya dela companya de la companya de la companya de la companya dela companya de la companya dela compa	4/27/2022	2		
Sign	nature of Registered Agent	Date			<del>-</del>
If signing on be	half of an entity:				
π.	Georgina Vega- Ass. Secretary				
13	rped or Printed Name  * * * FTLING FE	F · 635 NN * * *			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314