## F66000004228

(R	tequestor's Name)	
(À	ddress)	<del></del>
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Α)	ddress)	
(C	hty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	T-in Name	
(8	usiness Entity Name)	
(D	ocument Number)	-
Certified Copies	Certificates o	f Status
		<del></del>
Special Instructions to Fil	ling Officer:	

Office Use Only



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S. CHATHAM AUG - 8 2023

2023 KUG - 7 PH 2: 07

/ PH 2:07

2023 AUG -7 PM 3: 29

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 918151 8183246				
AUTHORIZATION				
COST LIMIT: \$ 35.00				
ORDER DATE : August 3, 2023				
ORDER TIME : 1:47 PM				
ORDER NO. : 918151-004				
CUSTOMER NO: 8183246				
CHANGE OF AGENT				
NAME: INPRODUCTION, INC.				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY PLAIN STAMPED COPY				
CONTACT PERSON: Eyliena Baker				
EXAMINER'S INITIALS:				

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

statement of cha	provisions of sections 607.0502, 617.0502 unge is submitted for a corporation organizer to change its registered office or register	zed under the laws of the State of DE	
1. The name of t	the corporation: INPRODUCTION, INC.		
2. The name of	office address: 4320 Winfield Road, Suite	200	
Warrenville, IL		<del></del>	
3. The mailing a	address (if different):		
-	poration/qualification: 06/19/2006	· <del>-</del>	8
	d street address of the current registered ag rtment of State: (If resigned, enter resigned		
	NRAI SERVICES, INC		202 5 - 1
	1200 South Pine Island Road		i jug
	Plantation, FL 33324		-7
6. The name and (if changed):	d street address of the new registered agent	(if changed) and /or registered office.	2023 AUG -7 PH 2: 07
	Corporation Service Company		7
	1201 Hays Street		
	P.O Box	NOT acceptable	
	Tallahassee	FL 32301	
The street addre as changed will	ess of its registered office and the street a be identical.	ddress of the business office of its regis	tered agent.
Such change wa authorized by th	as authorized by resolution duly adopted he board, or the corporation has been noti	by its board of directors or by an officer fied in writing of the change.	· so
- 4/1/		Mark Janek CFO	
<i>U</i> •	re of an officer of director	Printed or typed name and little	
l further agree t of my duties, an document is bei corporation has	the appointment as registered agent and to comply with the provisions of all statuted I am familiar with and accept the obliging filed merely to reflect a change in the seen notified in writing of this change.  Service Company	es relative to the proper and complete pation of my position as registered agent	i. Or. ii inis
apipolatioi	Tel h	08/03/2023	
	mature of Registered Agent	Date	
If signing on be	half of an entity:		
	Asst. Vice President		
Ty	yped or Printed Name		
	* * * FILING FEE	E: \$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)