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From:

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Account Number : I20160000086 Phone : (561)508-5033 Fax Number : (561)694-1639

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## REGISTERED AGENT CHANGE INTTRA, INC.

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS $\footnote{10pt}$

| statement of chi   | ange is submitted for a corporation org  | 302, 607.1308, or 617.1308, Florida Statutes, this ranized under the laws of the State of Dolawace istered agent, or both, in the State of Florida.  |
|--|--|--|
| 1. The name of   | the corporation: INTTRA, INC.  | ·<br>  |
|  | office address: 9600 Great Hills Trail, S  | ujte 300E, Austin, TX 78759  |
|  |  | 5.2  |
| 3. The mailing   | address (if different):  |  |
| 4. Date of incor   | poration/qualification: 06/26/2007   | Document number: F07000003266  |
|  | d street address of the current registered runent of State: (If resigned, enter resig  | agent and registered office on file with the ned)  |
|  | CORPORATION SERVICE COMPAN   | Y (  |
|  | 1201 HAYS STREET   |  |
|  | TALLAHASSEE, FL 32301  |  |
| 6. The name an<br>(if changed):  | d street address of the new registered ag  | gent (if changed) and /or registered office  |
|  | United Agent Group Inc.  |  |
|  | 801 US Highway 1   |  |
|  |  | Box NOT acceptable   |
|  | North Palm Beach, FL 33408   |  |
| The street addr  | ess of its registered office and the stree<br>be identical.  | et address of the business office of its registered agent,   |
| Such change w<br>authorized by t   | as authorized by resolution duly adopt<br>he board or the corporation has been i   | ted by its board of directors or by an officer so<br>notified in writing of the change.  |
|  | AP/C   | Adia Myles, Attorney-in-Fact   |
| Signati  |  | Printed or typed name and title  |
| I hereby accept I further agree of my duties, as document is be corporation ha | the appointment as registered agent of to comply with the provisions of all stand I am familiar with and accept the oing filed morely to reflect a change in some of this change in the control of this change in the control of the change in t | and agree to act in this capacity.<br>atutes relative to the proper and complete performanc<br>bligation of my position as registered agent. Or, if thi<br>the registered office address, I hereby confirm that the<br>ge. |
|  | MULL   | 3/10/2022  |
| Şiş  | nature of Registered Agent   | Date   |
| If signing on be   | chalf of an entity:  |  |
| Adia Myles, Spe  | cial Secretary   |  |
| I  | yped or Printed Name   |  |
|  | * * * FILING I   | FEE: \$35.00 * * *   |

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