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.

Electronic Filing Cover Sheet

(((H24000089179 3)))



H240000891793ABC7

To:			MAR
	Division of Corporations		
	Fax Number	: (850)617-6380	55 o
		, ,,,,,	SSE A
From:			•
	Account Name	: LEGALINC CORPORATE SERVICES INC.	9: 33 F. F.
		: I20180000011	ယ
	Phone	: (844)386-0178	ု ့ ယ
	Fax Number	: (214)317-4754	

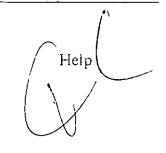
VITAR -6 PH 3: 2

REGISTERED AGENT CHANGE SOFTSERVE USA, INC.

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

Electronic Filing Menu

Corporate Filing Menu



To: 18506176380 From: 12147128131 Date: 03/05/24 Time: 8:09 PM Page: 02/02

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS (((H24000089179 3)))

statement of ch	ange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida organized under the laws of the State of egistered agent, or both, in the State of	Delaware		
1. The name of	the corporation: SOFTSERVE USA.	INC.			
	office address: 12800 UNIVERSITY			-	
3. The mailing a	address (if different):		.	_	
4. Date of incorporation/qualification: 01/29/2008 Document number: F080000			00421	_	
	d street address of the current register runent of State: (If resigned, enter re-	red agent and registered office on file w	vith the		
	EZERINS, VILNIS				
12800 UNIVERSITY DRIVE SUITE 410					
	FORT MYERS, FL 33907		202		
6. The name and (if changed):	d street address of the new registered	agent (if changed) and /or registered of	2024 HAR -6	-11	
	LEGALINC CORPORATE SERVICE	ES INC.	SSI ₹	1 1	
	476 Riverside Ave.		SSEE, F		
	Jacksonville, FL, US, 32202	O, Box NOT acceptable	33 -		
The street address changed will	ess of its registered office and the st	reet address of the business office of i	ts registered agen	i,	
Such change wa authorized by the	as authorized by resolution duly add he board, or the corporation has bee	opted by its board of directors or by an notified in writing of the change.	officer so		
Misse		VASYL MALCHYK, Secretary			
*	the appointment as registered agen to comply with the provisions of all id I am familiar with and accept the ing filed merely to reflect a change is s been notified in writing of this cha	Printed or typed name and to nt and agree to act in this capacity, statutes relative to the proper and con obligation of my position as registere in the registered office address, I here inge.		ce is e	
	nature of Registered Agent	2/27/2024			
Sig	nature of Registered Agent	Date			
If signing on be	chalf of an entity:				
John Moseley					
Т-	yped or Printed Name				

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