F08000003874

	(Requestor's Name)				
	(Address)				
	(Address)				
	(Address)				
	(City/State/Zip/Phone #)				
_	_	_			
PICK-UP	wait	MAIL			
	(Business Entity Name)				
	(Dasiness Entry (Tame)				
	(Document Number)				
Certified Copies	Certificates of Status				
					
Special Instructions to	Filing Officer:				
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Office Use Only



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TALLÁHÁSSEE, FLORIÐA

2023 SEP 13 AH 10: 19

ALLAHASSLE FIRMANIONS

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 933880 8113949				
AUTHORIZATION: Knul Sleman				
COST LIMIT : \$ 35.00				
ORDER DATE : August 11, 2023				
ORDER TIME : 9:18 AM				
ORDER NO. : 933880-152				
CUSTOMER NO: 8113949				
CHANGE OF AGENT				
NAME: INMAR, INC.				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY				
XX 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 607.050 unge is submitted for a corpord er to change its registered offic	ntion organized under the law	s of the State of 1	NC
	the corporation: INMAR, INC.	e or registered agent, or but	i, in the State of Fi	ioriuu.
2. The principal	office address: 1 W 4th St Ste	500 WINSTON-SALEM, NO	27101	
F			,	·
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 09/03/	2008 Document n	umber: <u>F080000</u>	03874
	I street address of the current r rtment of State: (If resigned, er		d office on file wit	h the
	LEGALINC CORPORATE S	SERVICES INC.		
	476 RIVERSIDE AVE.			
	JACKSONVILLE	FL	JACKSONVILLE	2023 :
6. The name and (if changed):	i street address of the new regi	stered agent (if changed) and	/or registered offi	SSE W
	Corporation Service Compa	ny		AH IO:
	1201 Hays Street			H10: 19
		P.O. Box NOT acceptable		9 0 A
	Tallahassee	FL_	32301	
The street addre	ess of its registered office and be identical.	the street address of the bus	iness office of its	registered agent,
Such change wa authorized by th	as authorized by resolution du ne board, or the corporation h	lly adopted by its board of di as been notified in writing of	irectors or by an of f the change.	officer so
a. and	ren austri	J. Andrew Austin	ı	Asst. Secretary
<i>V</i>	re of an officer or director		d or typed name and title	ē
of my duties, an document is beil corporation has	the appointment as registered comply with the provisions of I am familiar with and accome filed merely to reflect a che been notified in writing of the Selvice Company	of all statutes relative to the pt the obligation of my posit ange in the registered office	his capacity. proper and comp tion as registered address, I hereby	plete performance agent. Or, if this v confirm that the
By: Diaco (Kub) 09/12/2023		12/2023		
Sig	nature of Registered Agent		Date	
If signing on bel	half of an entity:			
	y, Asst. Vice President pped or Printed Name			

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