## F10000000976

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(Ke	equestor's Name)				
(Ac	idress)				
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PICK-UP	MAIT	MAIL			
/D:	siness Entity Name	<u> </u>			
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Certified Copies	ertified Copies Certificates of Status				
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SECRETARY OF STATE

12,212,23

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: MIX TELEMATICS NORTH AMERIC Name of Corporation	CA, INC.		
DOCUMENT NUMBER: F1000000976			
The enclosed Statement of Change of Registered	A Office/A gent and the are submitted for filing		
Please return all correspondence concerning this	smatter to the following:		
Paul Dell			
Name of Contact Person	<del></del>		
MiX Telematics North America, Inc.			
Firm/Company			
750 Park of Commerce Blvd., Suite #310			
Address			
Boca Raton, FL 333487			
City/State and Zip Code			
paul.dell@mixtelematics.com	1		
E-mail address: (to be used for future annua	report notification)		
For further information concerning this matter, p	please caff:		
Wendy Lemenze	at ( <sup>561</sup> ) 797-5745 Area Code & Daytime Telephone Number		
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a \$35,00 check made payable to the	Department of State.		
Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	provisions of sections 607,0502, 617,050 inge is submitted for a corporation organ ir to change its registered office or regist	uzed under the laws of the Sta	te of Flori	da	is
	the corporation: MiX Telematics North At	•	C OJ T TOJI I	ш.	
	office address: 750 Park of Commerce Bly		33487		
3. The mailing a	ddress (if different): 750 Park of Comme	ree Blvd., Suite #310, Boca Rate	on, FL 334	87	
	poration/qualification:				
	I street address of the current registered a tment of State: (If resigned, enter resigne		file with th	he	
	Martin Mallinger				
	2424 North Federal Highway, Suite #456				
	Boca Raton, FL 33431		က <u></u> က	2027	
6. The name and (if changed):	d street address of the new registered age	nt (if changed) and /or register	ALEAH ALEAH	JUL 25	T
	Paul Dell		ÀSS ÀSS	玉玉	m
	750 Park of Commerce Blvd., Suite #310		ني كان الم	<b>™</b>	J
	P.O. Bo Boca Raton, FL 33487	x NOT acceptable	-FL	39	
The street addre	ess of its registered office and the street be identical.	address of the business office	e of its re	gistere	d agent,
Such change wa authorized by th	is authorized by resolution duly adopted ne board, or the corporation has been no	d by its board of directors or botified in writing of the chang	by an offi e.	eer so	
- Swaat	CyroldS	Sarah Reynolds Printed or typed name	a invliile	<del></del>	
L hereby accept Lûwther aaree	the appointment as registered agent and to comply with the provisions of all stated I am familiar with and accept the obting filed merely to reflect a change in the beginning of this change.	nd agree to act in this capacity	v. d coninta	te perfe ent. O onfirm	ormance or, if this that the
	Haul Dell	7/18/2023			
_	nature of Registered Agent	Date			
	half of an entity:				
	North America, Inc.  yped or Printed Name				
	* * * FILING FI	EE: \$35.00 * * *			

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