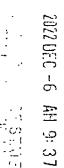
## -10000001459

(Re	questor's Name)	- <del></del>
(Ad	dress)	
/Ad	ldress)	
(/iu	u(e33)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Ru	siness Entity Nam	ne)
(50	Siness Entity Han	ne,
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		I

Office Use Only



100395058871



A. BUTLER DEC -7 2022 CORPORATION SERVICE COMPANY 1201 Hays Street

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

	ACCOUNT NO.	:	12000000	195	
	REFERENCE	:	179575	5162805	
	AUTHORIZATION	:	Louelle		
	COST LIMIT	:	\$ 35.00	Kenan	
ORDER DATE : D	ecember 5, 2022	2	_ • • •		
ORDER TIME : 1	0:13 AM				
ORDER NO. : 1	79575-006				
CUSTOMER NO:	5162805				
CHANGE OF AGENT					
NAME:	KUDELSKI SEC	JRIT	Y, INC.		
PLEASE RETURN T	HE FOLLOWING AS	F PR	OOF OF FIL	ING:	
CERTIFI XX PLAIN S	ED COPY TAMPED COPY				
CONTACT PERSON:	-				
	र म	CAMT	תדומו פיקומ	TAT.S.	

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

statement of cha	provisions of sections 607.0502, 6 inge is submitted for a corporation ir to change its registered office or	organized under the laws	of the State of	MN	this	_
1. The name of t	the corporation: KUDELSKI SECU	IRITY, INC.				
2. The principal	office address: 5090 North 40th S	treet Suite 450 Phoenix, /	AZ 85018	_		<del>-</del>
3. The mailing a	address (if different):					_
4. Date of incorp	poration/qualification: 03/19/201	Document nu	mber:F10000	001459		
	I street address of the current regis timent of State: (If resigned, enter		office on file w	ith the		
	C T CORPORATION SYSTEM			_		
	1200 SOUTH PINE ISLAND RO	DAD		_		
	PLANTATION	FL	33324		202	
6. The name and (if changed):	d street address of the new register	ed agent (if changed) and /	or registered of	fice. —	2 DEC -6	7 F
	Corporation Service Company		<del></del>		₹	
	1201 Hays Street				AH 9:	
		P.O. Box. NOT acceptable		٠١٠	37	
	Tallahassee	FL	32301	-		
The street addreas changed will	ess of its registered office and the be identical.	street address of the busi	ness office of it	ts registe	red age	ent.
Such change was authorized by th	as authorized by resolution duly a ne board, or the corporation has b	dopted by its board of dir een notified in writing of	ectors or by an the change.	officer s	50	
Xi	e E. Cionie	JILL CILMI			PRES	DENT
7 }	re of an officer or director		or typed name and to			
согроганов наз	the appointment as registered ag to comply with the provisions of a d I am familiar with and accept t ng filed merely to reflect a chang been notified in writing of this c n Service Company	ent and agree to act in in ill statutes relative to the he obligation of my positi e in the registered office i hange.	is capacity, proper and con on as registere address, I herei	iplete pe å agent, by confir	erforma Or, if m that	mce this the
By: <u>Mar</u>	· Z-Kubi	12/06/2022				_
	nature of Registered Agent		Date			
If signing on be	half of an entity:					
GRACE E. KIRE	BY, ASST. VICE PRESIDENT					
Ty	yped or Printed Name					

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