

F10000002576

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

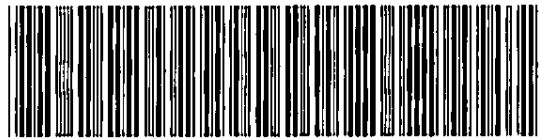
(Document Number)

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18 SEP 25 AM 12:00

18 SEP 25 PM 1:52

S TALLENT  
SEP 26 2018

R/A-CH

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 410953 7688666  
AUTHORIZATION :   
COST LIMIT : \$ 35.00

-----  
ORDER DATE : September 25, 2018

ORDER TIME : 1:0 PM

ORDER NO. : 410953-005

CUSTOMER NO: 7688666  
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CHANGE OF AGENT

NAME: SIMOS INSOURCING SOLUTIONS  
CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Emily Croft

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SIMOS INSOURCING SOLUTIONS CORPORATION  
Name of Corporation

**DOCUMENT NUMBER:** F10000002576

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Tammy Brown

Name of Contact Person

True Blue, Inc.

Firm/Company

1015 A Street

Address

Tacoma, WA 98402

City/State and Zip Code

tbrown@trueblue.com

E-mail address: (to be used for future annual report notification) ✓

For further information concerning this matter, please call:

Tammy Brown

253

680-8474

Name of Contact Person

at ( )

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  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SIMOS INSOURCING SOLUTIONS CORPORATION
2. The principal office address: 12220 BIRMINGHAM HIGHWAY, BUILDING 60  
MILTON, GA 30004
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 09/23/2016 6/4/2010 Document number: F10000002576
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

COGENCY GLOBAL INC.

115 North Calhoun St. Suite 4

Tallahassee

FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

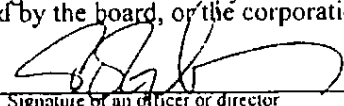
P.O. Box NOT acceptable

Tallahassee

FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Todd Gilman, Secretary  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

Corporation Service Company

By: 

Signature of Registered Agent

09/25/2018

Date

If signing on behalf of an entity:

Emily Croft

Asst. Vice President

Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

FILED  
19 SEP 25 AM 12:00  
TALLAHASSEE, FL