## F10 0000003486

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



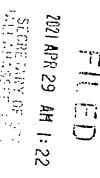
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**RECEIVED** 

APR 29 2021

04/30/21==01004==011 \*\*35.00

06/02/2021 JH





CSC - WILMINGTON 251 Little Falls Drive De 19808 Wilmington

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: April 27, 2021

Order#: 782175-007

Re: SMARTRONIX, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.
XX Please return evidence to the following:

Attn: Erika Zavala Daza

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

OUCA.XCOA

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

statement of cl	nange is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida Steganized under the laws of the State of $\frac{M}{M}$ gistered agent, or both, in the State of Flo	D
L. The name of	f the corporation: SMARTRONIX, INC.		
	al office address: 44150 SMARTRONIX	· ·	
3. The mailing	address (if different):		
		Document number: F1000000	
	nd street address of the current registere artment of State: (If resigned, enter resi	ed agent and registered office on file with gned)	the
	COGENCY GLOBAL INC.		
	115 North Calhoun St. Suite 4		
	Tallahassee, FL 32301		
6. The name ar (if changed):	<del>-</del>	ngent (if changed) and /or registered offic	e
	Corporation Service Company		2021 SEI
	1201 Hays Street		2021 APR 29 SECRETARY SECRETARY
	P.O.	Box NOT acceptable	- 1888 -
	Tallahassee ~	FL 32301	
The street addras changed wil	ress of its registered office and the stre If be identical.	eet address of the business office of its r	
Such change wanthorized by a	vas authorized by resolution duly adop the board, or the corporation has been	oted by its board of directors or by an of notified in writing of the change.	
	$\mathcal{A}$	Jeremy Koczan, Chief Financial Of	ficer
Signat	ure of an officer or director	Printed or typed name and title	<del></del>
I further agree of my duties, a document is be corporation ha	of the appointment as registered agent to comply with the provisions of all s and I am familiar with and accept the c ging filed merely to reflect a change in as been notified in writing of this chan on Service Company	and agree to act in this capacity. tatutes relative to the proper and compl obligation of my position as registered of the registered office address. I hereby ge.	lete performance igent. Or, if this confirm that the
	Onse. L-Koby, gnature of Registered Agent	04/26/2021	
		Date	
If signing on b	ehalf of an entity:		
	, Asst. Vice President		
	Typed or 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 (04/13)