F100000003588

	(Requestor's Name)
	(Address)
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	(Address)
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	(City/State/Zip/Phone #)
	PICK-UP WAIT MAIL
4.	(Business Entity Name)
=	
·	(Document Number)
Certified Co	ppies Certificates of Status
Special In	structions to Filing Officer
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	J. HORNE JUN 2 5 2024
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RECEIVED

CORPORATION SERVICE COMPANY 1201 Havs Street

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

ACCOUNT NO.	:	12000000	0195			
REFERENCE	:	503650	8453008			
AUTHORIZATION	ī :	Louelle	lena.			
COST LIMIT	:	\$ 35.00	we have			
ORDER DATE : June 18, 2024			*			
ORDER TIME : 2:08 PM						
ORDER NO. : 503650-003						
CUSTOMER NO: 8453008						
	- 	-				
CHANGE OF AGENT						
NAME: ALCOTRA NORTH AMERICA INC.						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Shauna Godbolt						
E	IIMAX	NER'S INI	TIALS:			

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

statement of cha	provisions of sections 607.0502, 617.0 nge is submitted for a corporation or r to change its registered office or reg	ganized under the la	ws of the State of Delaware
1. The name of t	he corporation: ALCOTRA NORTH	AMERICA INC.	
2. The principal	office address: 2603 Augusta Drive,	Suite 1250, Houstor	n, TX 77057
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 08/10/2010	Document i	number: F10000003588
5. The name and	street address of the current registere timent of State: (If resigned, enter resigned)	d agent and registere	
	Registered Agent Solutions, Inc.		
	2894 Remington Green Lane		
	Tallahassee	FL	32308
6. The name and (if changed):	street address of the new registered a	gent (if changed) and	-
	Corporation Service Company		2024
	1201 Hays Street		2024 30 21.
	P.O.	Box NOT acceptable	2:
	Tallahassee		32301
The street address as changed will	ss of its registered office and the stre be identical.	et address of the bu	siness office of its registered agent,
Such change wa authorized by th	s authorized by resolution duly adop e board, or the corporation has been	ted by its board of d notified in writing o	irectors or by an officer so
/s/ David Bla	nco	David Blanco,	Secretary/Treasurer
I hereby accept i I further agree to of my duties, and document is beir corporation has	the appointment as registered agent to comply with the provisions of all statement and facept the or gifted merely to reflect a change in been notified in writing of this change in Service Company		this capacity. This capacity. The proper and complete performance ition as registered agent. Or, if this address, I hereby confirm that the
3y: Sign	alure of Registered Agent	00/19/2024	Date
If signing on bel			
Ami M. Casper,	Asst .Vice President		
Туј	ped or Printed Name	nnn	

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CRZE045 (04/13)

503650 -