F10000004297

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(850) 656- 4724 3458 lakesore Drive Tallahassee, FL 32312

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Name:	ERM Certification & Verification Services Incorporated					
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Thank you!

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

statement of cha	nge is submitted for a corporation ϵ	7.0502, 607.1508, or 617.1508, Florida Statutes, th organized under the laws of the State of <mark>Delaware</mark> egistered agent, or both, in the State of Florida.	is			
	he corporation: ERM Certification &					
2. The principal						
		,				
4. Date of incorp	poration/qualification: 09/23/2010	Document number: F10000004297				
5. The name and Florida Depar	street address of the current registe tment of State: (If resigned, enter re	ered agent and registered office on file with the signed)				
	Cogency Global Inc.		20			
	115 North Calhoun Street, Suite 4					
			S- 9j			
6. The name and (if changed):	Tallahassee, FL 32301 Street address of the new registered agent (if changed) and /or registered office C T Corporation System					
	C T Corporation System		5			
	1200 South Pine Island Road					
	P.O Box NOT acceptable Plantation, Florida 33324					
		street address of the business office of its registere				
Such change wa authorized by th	is authorized by resolution duly ad ne board, or the corporation has be	lopted by its board of directors or by an officer so en notified in writing of the change.	•			
/s/Cory	Santos	Cory Santos, Secretary				
-	re of an officer or director	Printed or typed name and title				
I further agree of of my duties, an document is bei	to comply with the provisions of all id I am familiar with and accept the ing filed merely to reflect a change when notified in writing of this ch	ont and agree to act in this capacity. It statutes relative to the proper and complete per we obligation of my position as registered agent. (in the registered office address, I hereby confirm ange.	formance Or, if this I that the			
	Son C Charmento	07/29/2025				
Sig	nature of Registered Agent	Date				
If signing on be	half of an entity:					
SEAN L. EMER	ICK, ASSISTANT SECRETARY					
7	yped 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)

By: