F11000000 4053

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

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 179679 8410982

AUTHORIZATION

COST LIMIT : (\$\35.00

ORDER DATE: December 7, 2023

ORDER TIME : 1:15 PM

ORDER NO. : 179679-160

CUSTOMER NO: 8410982

CHANGE OF AGENT

NAME: PORSCHE CONSULTING, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson

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

statement of cha	nge is submitted for a corpor	02, 617.0502, 607.1508, or 617.1508, Florida Station organized under the laws of the State of $\frac{1}{2}$ ce or registered agent, or both, in the State of Fi	Delaware
1. The name of t	the corporation: PORSCHE (CONSULTING, INC.	
		Drive Atlanta, GA 30354	
3. The mailing a	uddress (if different):		
4. Date of incorp	poration/qualification: 10/10/	2011 Document number: F110000	04053
	I street address of the current tment of State: (If resigned, e	registered agent and registered office on file wit inter resigned)	h the
	C T CORPORATION SYS	TEM	
	1200 SOUTH PINE ISLAN	D ROAD	
-	PLANTATION	FL 33324	- · -
6. The name and (if changed):	I street address of the new reg Corporation Service Compa	gistered agent (if changed) and /or registered offi	8
	1201 Hays Street		·
		P.O. Box NOT acceptable	7
	Tallahassee	FL 32301	•
as changed will	be identical.	d the street address of the business office of its uly adopted by its board of directors or by an coas been notified in writing of the change.	
· Xu	. E. algui	Jill Cilmi	Vice President
Algabut I hereby accept I further agree i of my duties, an document is bei corporation has	re of an officer or director	Printed of typed name and till ed agent and agree to act in this capacity, s of all statutes relative to the proper and competent the obligation of my position as registered hange in the registered office address, I herebhis change.	
By: Drace	Z-Kubl.	11/29/2023	
Sign	nature of Registeled Agent half of an entity:	Date	
	-		
	Asst. Vice President pped or Printed Name		
':	per or remoderante	W W C PPP 01-00 / 1 / 1	

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