F12000001391

(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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1022 APR 12 PM 3: 31

RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	I200000001	95	
	REFERENCE	:	590328	8027298	
	AUTHORIZATION	:	Soul	dena	
	COST LIMIT	:	\$ 35.00		
ORDER DATE : A	April 5. 2022		-		
ORDER TIME :	-				
ORDER NO. :					
CUSTOMER NO:					
	<u>CHANGE OF A</u>	GE <u>N'</u>	<u> -</u> <u>r</u>		
NAME :	CQ SOURCING,	INC			
PLEASE RETURN CERTIF		PRO	OOF OF FILI	NG:	
CONTACT PERSON:	Eyliena Baker		NER'S INITI	ALS:	

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

statement of ch	ange is submitted for a corporation organ	02, 607.1508, or 617.1508, Florida Statutes nized under the laws of the State of North	Carolina
		tered agent, or both, in the State of Florida.	
1. The name of	the corporation: CQ SOURCING, INC.		
2. The principal	l office address: 2635 E. Millbrook Road	, Raleigh, NC 27604	
3. The mailing	address (if different): 5008 Airport Road	, Roanoke, VA 24012	
	rporation/qualification: 03/30/2012		<u> </u>
	d street address of the current registered authority of State: (If resigned, enter resigned	agent and registered office on file with the ed)	
	NRAI Services, Inc		
	1200 South Pine Island Road		20
	Plantation	FL 33324	2022 APC
6. The name an (if changed):	d street address of the new registered age	ent (if changed) and /or registered office	2
	Corporation Service Company		
	1201 Hays Street		27
		x NOT acceptable	ယ
	Tallahassee	FL 32301	
The street addr as changed wil	ress of its registered office and the street I be identical.	t address of the business office of its regist	ered agent,
Such change wanthorized by t	vas authorized by resolution duly adopte the board, or the corporation has been no	d by its board of directors or by an officer otified in writing of the change.	so
Xi	ee E agnie	Jill Cilmi, Vice President	
/ ""T"	ure of an officer or director	Printed or typed name and title	
I further agrée of my duties, as document is be corporation ha	I the appointment as registered agent ar to comply with the provisions of all stat and I am familiar with and accept the ob- ping filed merely to reflect a change in the son Service Company!	tutes relative to the proper and complete p ligation of my position as registered agent he registered office address, I hereby confi	erformanc. Or, if this irm that the
ву:	i M Lei	04/08/2022	
Sij	gnature of Registered Agent	Date	
If signing on be	ehalf of an entity:		
	er, Asst. Vice President Typed or Printed Name		
	* * * FILING F	ኖፑ∙	
	Callity Pi	ale galatt	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)