4/8/24, 3:45 PM



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Phone Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future. annual report mailings. Enter only one email address please. >

Email	Address:			
CHIGIT	MUUI CSS.			

REGISTERED AGENT CHANGE PRIDE INDUSTRIES ONE, INC.

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Τo:

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

19548277645

statement of cha	nge is submitted for a corporation org	0502, 607,1508, or 617,1508, Florida Ste ganized under the laws of the State of <u>Ca</u>	lifornia					
		ristered agent, or both, in the State of Fla	rida.					
	he corporation: PRODE INDUSTRIES	ONE, INC.						
2. The principal	office address: 10030 Foothills Blvd							
	Roseville, CA 95747							
3. The mailing a	ddress (if different):	<u> </u>						
4. Date of incorp	poration/qualification: 04/12/2012	Document number: F12000001;	584					
	I street address of the current registere timent of State: (If resigned, enter resigned)	d agent and registered office on file with gned)						
	CORPORATE CREATIONS NETWO	RK, INC.	24					
	801 US HIGHWAY I NORTH		2024 APR -8					
	PALM BEACH, FL 33408		3 MIO: 46					
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):								
	C T Corporation System		ア					
	1200 South Pine Island Road							
	P.O. Box NOT acceptable Plantation, Florida 33324							
The street addre	ess of its registered office and the stre be identical.	eet address of the business office of its i	registered agent,					
Such change wa authorized by th	is authorized by resolution duly adoption board, or the corporation has been	oted by its board of directors or by an of notified in writing of the change.	ficer so					
/s/ Jeff Der		JEFF DERN, PRESIDENT						
	re of an officer or director	Printed or typed name and title						
l further agrée t of my duties, an document is bei corporation has	d Lam familiar with and accept the a ny filed merety to reflect a change in been notified in writing of this chan	tatutes relative to the proper and compobligation of my position as registered of the registered of the address. I hereby	lete performance igent. Or if this confirm that the					
C T Corporation	System Ser Commits	04/03/2024						
Sigi	nature of Registered Agent	Date						
If signing on be	half of an entity:							
SEAN L. EMER	ICK, ASSISTANT SECRETARY							
Ty	ped 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)

Ву: