## F12000003725

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(Requestor's Name)				
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(0) 10 to 15 10 to				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Dusiness Link) Name,				
(Document Number)				
Certified Copies Certificates of Status				
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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: May 16, 2019

Order#: 748408-002

Re: INNOVATION COMPOUNDING, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

YX Please return evidence to the following:

Attn: Ashley Jiminez c/o Corporation Service Company 251 Little Falls Drive

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	provisions of sections 607.0502, 617.0. inge is submitted for a corporation org	anized under the laws of the State of $\underline{ extstyle 0}$	GEORGIA	
	r to change its registered office or regi		Florida.	
1. The name of t	the corporation: INNOVATION COMPO	OUNDING, INC.		
2. The principal	office address: 6095 PINE MOUNTAIN	N RD NW, STE 108, KENNESAW, G	A 30152	
3. The mailing a	ddress (if different);			
4. Date of incorp	poration/qualification: 09/10/2012	Document number: F120000	03725	
	I street address of the current registered tment of State: (If resigned, enter resigned)		th the	
	INCORP SERVICES, INC.			
	17888 67TH COURT NORTH		<b>2</b> 6	
	LOXAHATCHEE, FL 33470		II9 MA ECRE	البرايي
6. The name and (if changed):	l street address of the new registered ag		Ω.	
	Corporation Service Company		PM 5: SEE, F	5
	1201 Hays Street		7.E	
		O l'acceptable		
	Tallahassee	FL 32301		
The street address changed will	ess of its registered office and the stree be identical.	et address of the business office of its	s registered agent.	
Such change wa authorized by th	as authorized by resolution duly adopt ne board, or the corporation has been r	ed by its board of directors or by an ontified in writing of the change.	officer so	
Xiel	2 Coni	Jill Cilmi, Vice President		
Shenatu	re of an officer or director	Printed or typed name and title	e	
I further agree to performance of agent. Or, if the hereby confirm	the appointment as registered agent of comply with the provisions of all stand and duties, and I am familiar with and is document is being filed merely to rethat the corporation has been notified in Service Company	atutes relative to the proper and com Laccept the obligation of my position effect a change in the registered offic	i as registered	
By:	a Takinhi	05/16/2019		
~ <-> <-> <-> <-> <-> <-> <-> <-> <-> <->	Muhare W. Refuntered Agent	Date		
If signing on be	half of an entity:			
Grace E. Kirby,	Asst. Vice President			
T	yped or Printed Name			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee. FL 32314

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