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NAME:

KRUSE PEO INC

TYPE OF FILING: CHANGE OF AGENT

COST:

35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION:

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

statement of ch	e provisions of sections 607.0502, 617.050 nange is submitted for a corporation organ	nized under the laws of the St	ate of Oklah				
	ier to change its registered office or regist	KELIGE SEC IV	-				
1. The name of	name of the corporation: KRUSE PEO INC						
	al office address: 96 E 101st E Ave #H	Tulsa	ОК	74133			
 		. 4,04		77100			
4. Date of incor	rporation/qualification: March 26, 20	015 Document number:	F13000	0006	212		
5. The name an Florida Depa	nd street address of the current registered a artment of State: (If resigned, enter resigne	gent and registered office on ed)	file with the				
	NRAI Service	ces, Inc.					
	1200 S Pine Islar	nd Rd					
	Plantation, F	L 33324		ਲੀ	JAT 38		
6. The name and (if changed):	d street address of the new registered agen	nt (if changed) and /or registe	red office	NOF.			
	National Corporate Rese	earch, Ltd., Inc.		C) 37e	8388 877 877		
	155 Office Plaza Drive			AH IO:	S		
	P.O. Box NOT	•		: 28			
	Tallahassee, FL 32301	<u> </u>		Ψ,	E A		
The street address changed will	ess of its registered office and the street a l be identical.	address of the business office	of its registere	d agent,			
Such change was	as authorized by resolution duly adopted board or the corporation has been not	by its board of directors or t ified in writing of the change	y an officer so				
Signatu	U. Will ure of an officer or director	CHRIS WAI	and title	1			
I hereby accept I further agree to berformance of agent. Or, if in hereby confirm	the appointment as registered agent and to comply with the provisions of all statu my duties, and I am familiar with and ac is document is being filed merely to refle that the corporation has been notified in	l agree to act in this capacity tes relative to the proper an ecept the obligation of my po ct a change in the registered writing of this change.), d complete sition as registe l office address,	ered I			
Sea	enthoran	6/10/20	15				
	mature of Registered Agent	Date		.			
f signing on be	chalf of an entity:						

Sean Honan, Assistant Secretary

Typed or Printed Name

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