1/26/2021





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

Pursnant to the provisions of sections 607,0502, 617,0502, 607,1508, or 617,1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of $\overline{\mathsf{DE}}$ _ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: <u>AFS Technologies Holdings</u>, Inc.

2. The principal office address: 5201 W Kennedy Blvd, Ste 200 Tampa, FL 33609

3. The mailing address (if different): <u>5201 W Kennedy Blvd. Ste 200 Tampa, FL 33609</u>

____Document number: _____F13000002796 4. Date of incorporation/qualification: <u>6/26/2013</u>

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

CAPITOL CORPORATE SERVICES, INC.

515 EAST PARK AVENUE, 2ND FL

TALLAHAŞSEE, FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office 202 (if changed):

C T Corporation System	F.	JAN	1
1200 South Pine Island Road		26	14 14
P.O. Box NOT acceptable		AH	, YP
Plantation, Florida 33324	! ?¿	ä	

The street address of its registered office and the street address of the business office of its registered free as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Signature of an officer or director

Denise Bell, Secretary

Printed or typed name and litle

Date

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

By:

Signature of Registered Agent

01/25/2021

If signing on behalf of an entity:

Michele Holden, Asst. Secretary

Typed 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)