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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062

Phone : (888)705-7274

Fax Number

: (888)706-7274

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

Email Address:

REGISTERED AGENT CHANGE SALTCHUK RESOURCES, INC.

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## COVER LETTER

TO: Amendment Section Division of Corporations

SALTCHUK RESOURCES, INC.
Name of Corporation

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Margot Mullin

Name of Contact Person

Registered Agent Solutions, Inc.

Firm/Company

1701 Directors Blvd, Ste 300

Address

Austin, TX 78744

City/State and Zip Code

notices@rasi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Margot Mu

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:** 

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

H190002198553

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

statement of ch	provisions of sections 607.05 ange is submitted for a corpor er to change its registered offi	ation organize	d under the la	iws of the State o	/ Washir	
1. The name of	the corporation: SALTCH	HUK RES	OURCE	S, INC.		<del></del>
	office address: <u>450 Alas</u> LE, WA 98104	skan Way	South,	Suite 708		
3. The mailing	address (if different):					<u> </u>
4. Date of incor	poration/qualification: 6/16	5/2014	Document	number: <u>F14</u>	000002	2580
	d street address of the current attment of State: (If resigned, e	nter resigned)	-	ed office on file	with the	
	NRAI SERVIC	ES, INC	` '	· ·-· · · · · · · · · · · · · · · · · ·	<del></del>	
	1200 SOUTH PINE ISL	AND ROAD	)			
	PLANTATION		FL	33324	_	
6. The name an (if changed):	Registered Age	ent Soluti	ons, Inc	<u>.</u>	office:,	2019 JUL 22 AN
	Tallahassee	FL FL	<sub>тркави</sub> 323(	01	<u></u>	رية
The street addr	ess of its registered office and be identical.	d the street add	iress of the b	usiness office of	its register	ထ
Such change wa authorized by the	as authorized by resolution de he board, or the corporation h	uly adopted by nas been notifie	its board of ed in writing	directors or by a of the change.	n officer so	)
/s/ Mark	N. Tallett ure of an officer or director	<u> </u>	Mark N.	Tabbutt	Pres	ident
I further agree performance of agent. Or, if the hereby confirm	t the appointment as registere to comply with the provisions i my duties, and I am familiar is document is being filed me that the corporation has bee mature Registered Agent	s of all statutes with and acce rely to reflect n notified in w	aree to not in	this capacity, he proper and ca tion of my positi he registered off change.		tered s, I
If signing on be	chalf of an entity:					
	Hart, Assistant Secreta Typed or Printed Name	ry				

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