F14000005166

(Requestor's Name)	_					
(Address)	_					
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status	_					
Special Instructions to Filing Officer.						

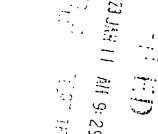
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A. BUTLER

JAN 1 2 2023



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:()1/11/2023	
	Chris Vick	
Reference #:_	4040000	_
Entity Name:	ECMC	EDUCATION, INC.
☐ Articles	of Incorporation/Authoriza	ion to Transact Business
Amend	lment	
✓ Change	e of Agent	
☐ Reinsta	atement	
Conve	rsion	
☐ Merger		
☐ Dissolu	ition/Withdrawal	
Fictition	us Name	
Other_		
Authorized Ar	nount: \$35.00	

F: +852.2682.9790

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

statement of cha	nge is submitted for a corporation	7,0502, 607.1508, or 617,1508, Flor organized under the laws of the State registered agent, or both, in the State	of Dela	aware	=
L. The name of t	ne corporation:	ECMC EDUCATION,	INC.		<u>.</u>
	office address: No Change				
3. The mailing a	ddress (if different):				
4. Date of incorp	oration/qualification: Decembe	r 2, 2014 Document number:	F14000	0051	66
	street address of the current regist tment of State: (If resigned, enter r	ered agent and registered office on fi esigned)	le with the		
	C T CORPOR	RATION SYSTEM			
	1200 SOUTH P	INE ISLAND ROAD			
	PLANTATI	ON, FL 33324	·	20	
6. The name and (if changed):	street address of the new registere	rd agent (if changed) and /or registere	ed office	2023 JAH 1	1 1
	COGENCY GLOBA	AL INC.	<u>.</u>		
	115 North Calhoun			M 9:	در در در گور
	Tallahassee, FL 3	NOT acceptable		: 29	
The street addre	ss of its registered office and the be identical.	street address of the business office	of its regist	ered ag	gent.
Such change wa authorized by th	s authorized by resolution duly ac e board, or the corporation has be	lopted by its board of directors or by ten notified in writing of the change	y an officer	80	
/s/ Adam Tra	mpe	Adam Trampe VP			
I hereby accept I further agree i performance of agent. Or, if the	the annointment as revistered avi	ent and agree to act in this capacity, ll statutes relative to the proper and and accept the obligation of my pos to reflect a change in the registered		gsterea ess. I	1
/s/ Timothy Mayville 12/6/2022				_	
·	nature of Registered Agent	Date			

If signing on behalf of an entity:

Timothy Mayville, Assistant Secretary

Typed or Printed Name

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