[redacted]

F15 000005261

(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:

Office Use Only

600423417136

02/13/24--01021--020 **35.00

FILED
2024 FEB 13 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. HUNT
02/13/24

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CENTER FOR HUMAN CAPITAL INNOVATION, INC.
Name of Corporation

DOCUMENT NUMBER: F15000005261

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:

Cameron Biddy
Name of Contact Person

ZenBusiness Inc.
Firm/Company

336 E. College Ave. Suite 301
Address

Tallahassee, FL 32301
City/State and Zip Code

ra@zenbusiness.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cameron Biddy at (844) 493-6249
Name of Contact Person — Area Code & Daytime Telephone Number

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)

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

Pursuant 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 Virginia *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Center for Human Capital Innovation, Inc.

2. The principal office address: 44 Canal Center Plaza Suite G1
Alexandria, VA 33305

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/30/2015 Document number: F15000005261

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)

Allen , Zeman, Phd

3200 NE 19th Street

FORT LAUDERDALE, FL 33305

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

ZenBusiness Inc.

336 E. College Ave. Suite 301

P.O Box NOT acceptable

Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, 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.

/s/ Allen Zeman
Signature of an officer or director

Allen Zeman
Printed or typed name and title

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.

Signature of Registered Agent

1/26/2024
Date

If signing on behalf of an entity:

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)