## F160000002546

(Requestor's Name)				
(Address)				
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations		
SUBJ	ECT: ARA Holdings of New Mexico, Inc.		
Name	of Corporation		-
DOC	UMENT NUMBER: F16000002546		
The er	nclosed Statement of Change of Registered	Office/Agent and	d fee are submitted for filing.
Please	return all correspondence concerning this	matter to the follo	owing:
Thorns	sa Rhodes		
	of Contact Person		
	ed Research Associates, Inc.		
	Company		
	San Mateo Blvd. NE, Suite A-220		
Addre			
	uerque, NM 87110		
-	state and Zip Code		
Cityio	trhodes@ara.com		
Г			isan —
E-ma	il address: (to be used for future annual	report normeati	ion)
Cor fo	orther information concerning this matter, p	duaca call:	
roriu	ittler information concerning this matter, p	nease can,	
Theres	sa Rhodes	at (505	\881-8074
	Name of Contact Person	Area	) 881-8074 a Code & Daytime Telephone Num
Enclos	sed is a \$35.00 check made payable to the	Department of Sta	ate.
	Mailing Address: Amendment Section	Street Add Amendme	dress: ent Section

Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, organized under the laws of the State of New Mes registered agent, or both, in the State of Florida.			
1. The name of t	he corporation: ARA Holdings of N	New Mexico, Inc.			
2. The principal Albuquerque, NA	office address: 4300 San Mateo Blv	d. NE, Suite A-220			
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 6/4/2015	Document number: F16000002546			
	street address of the current regist tment of State: (If resigned, enter r	tered agent and registered office on file with the resigned)			
	Lisa Kirk		2021		
		2021 CCT 13			
	Panama City, FL 32401				
6. The name and (if changed):	street address of the new registere	ed agent (if changed) and /or registered office	PH 3: 10		
	Laura Quaglino		_		
430 W. 5th St., Ste. 700					
P O, Box NOT acceptable					
	Panama City, FL 32401				
The street addre as changed will	ss of its registered office and the be identical.	street address of the business office of its registe	ered agent,		
Such change was authorized by th	is authorized by resolution duly a le board, or the corporation has be	dopted by its board of directors or by an officer seen notified in writing of the change.	so		
Cut C Dustage Curt A. Beckemeyer, Director					
I hereby accept I further agree t of my duties, an document is bei	the appointment as registered ag the appointment as registered ag to comply with the provisions of a d I am familiar with and accept th ng filed merely to reflect a chang been notified in writing of this c	Printed or typed name and title  went and agree to act in this capacity.  all statutes relative to the proper and complete pound  the obligation of my position as registered agent,  is in the registered office address, I hereby confinent	erformance Or, if this rm that the		
Jak.	nature of Registered Agent	10/04/2021			
If signing on be	half of an entity:				
Lauras	M- Quaglin O				

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