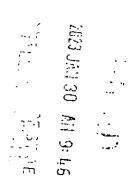
## F16600004715

(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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600400520316





A. BUTLER
JAN 3 1 2023

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 418587 8402951					
AUTHORIZATION :					
COST LIMIT : STORES					
$\theta$					
ORDER DATE : January 27, 2023					
ORDER TIME : 9:15 AM					
ORDER NO. : 418587-010					
CUSTOMER NO: 8402951					
CHANGE OF AGENT					
NAME: TRIDENT SYSTEMS INCORPORATED					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Eyliena Baker					
EXAMINER'S INITIALS:					

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

statement of cha	inge is submitted for a corporati	617.0502, 607.1508, or 617.1508, Florida Sto on organized under the laws of the State of $\frac{\text{Vi}}{\text{O}}$	rginia	nis
	the corporation: ${}$ TRIDENT SYS	or registered agent, or both, in the State of Flo STEMS INCORPORATED	rida.	
2. The principal	office address: 10201 Fainax B	Blvd, Suite 300, Fairfax, VA 22030		
3. The mailing a	ddress (if different);			
4. Date of incorp	poration/qualification: October 2	24, 2016 Document number: F1600000	4775	
	I street address of the current reg tment of State: (If resigned, ente	gistered agent and registered office on file with or resigned)	the	
	CT Corporation System			<u>r</u> ~:
	1200 S Pine Island Road		***	923 J
	Plantation	FL 33324	•	1823 JAH 30
6. The name and street address of the new registered agent (if changed) and /or registered official (if changed):			3 12 <u>.</u> . Og	-
	Corporation Service Company	1		37 :6
	1201 Hays Street		) <del>7 1</del>	O1
		P.O. Box NOT acceptable		
	Tallahassee	FL 32301		
_		ne street address of the business office of its r		d agent,
Such change wa authorized by th	e board, or the corporation has	adopted by its board of directors or by an of been notified in writing of the change.	licer so	
(S) = 11	and have f	Bonnie Bdwards Treasurer / Socretary		
Signatur	e of an officer or director	Printed or typed name and title		<del></del>
l further agree to of my duties, and document is beir corporation has	the appointment as registered a o comply with the provisions of d I am familiar with and accept ng filed merely to reflect a chan been notified in writing of this I Service Company	igent and agree to act in this capacity. I all statutes relative to the proper and completely the obligation of my position as registered age in the registered office address. I hereby a change.	ete perfe gent. O confirm	ormance or if this that the
By: Thirdney M	. Baronie	01/27/2023		
Lindsey M. Baronie	ature of Registered Agent e, Assistant Vice President	Date		
If signing on bel	nalf of an entity:			
Ту	ped or Printed Name	_		

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