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J9/23/2022

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 959975 8390430 AUTHORIZATION : COST LIMIT : ORDER DATE: September 16, 2022 ORDER TIME : 9:28 AM ORDER NO. : 959975-038 CUSTOMER NO: 8390430 CHANGE OF AGENT NAME: DBM VIRCON SERVICES (USA), INC. PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY CONTACT PERSON: Alexxis Weiland EXAMINER'S INITIALS:

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

statement of cha	nge is subn	nitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florida Statutes, tion organized under the laws of the State of <u>Arizona</u> e or registered agent, or both, in the State of Florida.	this
1. The name of t	he corporat	tion: DBM VIRCO	N SERVICES (USA), INC.	
2. The principal	office addr	ess:_1230 W. Wash	nington Street, Suite 201, Tempe, AZ 85281	
4. Date of incorp	poration/qu	alification: 11/18/2	2016 Document number: F16000005168	
5. The name and	l street addi		egistered agent and registered office on file with the	
	United Ag	gent Group Inc.		
801 US Highway 1				2012 8 - 7
North Palm Beach, FL 33408			08	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			22 Pii	
	Corporati	on Service Compa	ny	3: 46
1201 Hays Street				
P.O. Box NOT acceptable				
	Tallahass	see	FL 32301	
as changed will	be identica	al.	the street address of the business office of its registor	
Such change was authorized by the	as authorize he board, o	ed by resolution du r the corporation ha	ly adopted by its board of directors or by an officer as been notified in writing of the change.	so
X_{i}	ر می بعو	agnie	Jill Cilmi, Vice President	
I further agree of my duties, an document is bei corporation has	to compty ind I am fam ing filed me s been notij	ilment as registered	Printed or typed name and little all agent and agree to act in this capacity. of all statutes relative to the proper and complete pept the obligation of my position as registered agent. ange in the registered office address, I hereby confision capacity.	erformanc Or, if thi rm that the
70		Lei	09/16/2022	
By:	nature of Regis	stered Agent	Date	
If signing on be	half of an	entity:		
Ami M. Caspe	r, Asst. Vic			

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