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Division of Corporations

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From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

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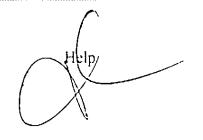
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## REGISTERED AGENT CHANGE VISUAL LABS, INC.

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

′isual Labs, Inc. Name of Corporation F18000001212 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: Mary Castillo Name of Contact Person Registered Agent Solutions, Inc. Firm/Company Corporate Center One, 5301 Southwest Pkwy, Ste 400 Address Austin, Texas 78735 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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

Amendment Section
Division of Corporations

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

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

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

statement of cha	provisions of sections 607,050 nge is submitted for a corpora r to change its registered offic	ition organized u	nder the la	ws of the S	State of <u>D</u>	elaw)		_	
	he corporation: Visual La office address: 1 North N		l Suite	500 1	Mesa,	AZ	8520	<u></u> )1	
_	ddress (if different):								
4. Date of incorp	coration/qualification: 3/12	/2018	Document	number: F	-1800	000	1212	· —	
	I street address of the current r tment of State: (If resigned, er	•	nd registere	ed office o	n file with	the			
	<b>COGENCY GL</b>	OBAL IN	1C.						
	115 NORTH CALHOUN	STREET,	SUIT	E 4		-			
	TALLAHASSEE		FL	32301	    2	10 10 10 10 10 10 10 10 10 10 10 10 10 1	2023 /		
6. The name and street address of the new registered agent (if changed) and /or registered of (if changed):  Registered Agent Solutions, Inc.						- ANY OF	2023 AUG 16 AM		
	2894 Remington G	Green Ln. S	Ste. A			고 기 기	8:		
	Tallahassee	P.O. Box NOT a	3230	08		₹.	Δī		
The street addre as changed will	ss of its registered office and be identical.	the street addres	s of the bu	isiness off	ice of its i	registe	red age	nt.	
Such change wa authorized by th	s authorized by resolution du e board, or the corporation ha	ly adopted by its	board of on writing of	directors of the char	or by an of	fficer s	io		
's/ Terri Ros		T <u>er</u> i	i Rosa			Secre	etary		
hereby accept further agree to f my duties, and locument is bein	e of an officer or director  the appointment as registered  o comply with the provisions  d I am familiar with and acce  ng filed merely to reflect a ch  been notified in writing of th	of all statutes re pt the obligation ange in the regis	e to act in	ted or typed not this capacite proper of the cition as refered address,	itv.		rforma Or, if t m that t	nce his he	
Mo	08	08/15/2023							
Sign	nature of Registered Agent			Date				_	
f signing on bel	half of an entity:								
<del> </del>	r, Assistant Secretary								
Ту	ped or Printed Name ***FI	LING FEE: \$3:	5.00 * * *						

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)