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| (Requestor's Name) | | | | | |
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| (City/State/Zip/Phone #) | | | | | |
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| (Business Entity Name) | | | | | |
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| (Document Number) | | | | | |
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| Certified Copies Certificates of Status | | | | | |
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| Special Instructions to Filing Officer: | | | | | |
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A. RAMSEY MAR 13. 2024 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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| | ACCOUNT NO. | : I2000000195 |
|--------------|---------------|------------------|
| | REFERENCE | : 355641 8443008 |
| | AUTHORIZATION | Loutelesa |
| | COST LIMIT | : (\$ 35'.00 |
| ORDER DATE : | March 7, 2024 | |
| ORDER TIME : | 10:36 AM | |
| ORDER NO. : | 355641-004 | |

CUSTOMER NO: 8443008

CHANGE OF AGENT

NAME: BRANCHPATTERN, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt

EXAMINER'S INITIALS:

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 <u>NE</u> in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: BRANCHPATTERN, INC.

2. The principal office address: <u>2820 N. 48TH STREET LINCOLN, NE 68504</u>

3. The mailing address (if different): ______

4. Date of incorporation/qualification: 08/22/2018 Document number: F18000003859

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)

C T CORPORATION SYSTEM

| | 1200 SOUTH PINE ISLAND ROAD | | | — : 3 | 1200 | |
|---------------|---|----|-------|-------|------------|--|
| | PLANTATION | FL | 33324 | | HAR HAR | |
| (if changed): | street address of the new registered agent (if changed) and /or registered offic Corporation Service Company | | | | R 12 PH 12 | |
| | 1201 Hays Street | | | | SĻ | |
| | 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/ Debora Swanson

Debora Swanson, Secretary Printed or typed name and title

Signature of an officer or director

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. Thereby confirm that the corporation has been notified in writing of this change. Corporation Service Company

· C.Kubi By: Signature of Registered Agent

03/11/2024

Date

If signing on behalf of an entity:

Grace E. Kirby, Asst. Vice President

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) CSC 355641-4