

F190000000422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entry Name)

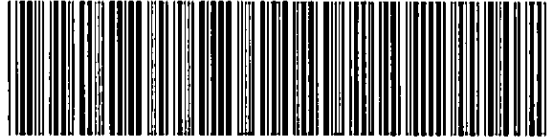
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



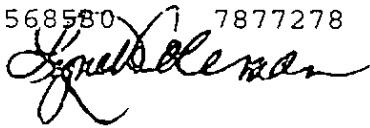
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CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 568530 7877278
AUTHORIZATION : 
COST LIMIT : \$ 35.00

ORDER DATE : March 23, 2022

ORDER TIME : 11:34 AM

ORDER NO. : 568530-009

CUSTOMER NO: 7877278

CHANGE OF AGENT

NAME: TREAN CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS: _____

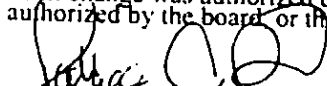
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

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 MN in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: TREAN CORPORATION
2. The principal office address: 150 LAKE STREET WEST WAYZATA, MN 55391
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/18/2019 Document number: F19000000422
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)
- PERRY, SARAH
5900 N. ANDREWS AVENUE, SUITE 100
FORT LAUDERDALE FL 33309
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
- Corporation Service Company
1201 Hays Street
Tallahassee FL 32301

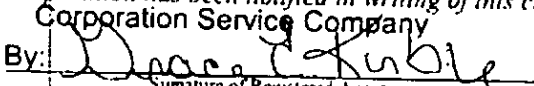
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.


Signature of an officer or director

Patricia Ryan GC/Secretary
Printed or typed name and title

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, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company
By: 
Signature of Registered Agent

03/16/2022

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)