F19000003190

| (Requestor's Name) |
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| (included) |
| (City/Charle 77) (Physics 40) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



100388548151



A. BUTLER MAY 3 1 2022

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : ,7,0,667,07 _ 8379201

AUTHORIZATION : The state of th

COST LIMIT : \$ 35.00

ORDER DATE : May 25, 2022

ORDER TIME : 2:11 PM

ORDER NO. : 706670-166

CUSTOMER NO: 8379203

CHANGE OF AGENT

NAME: WHEELER FINANCIAL FROM PITNEY

BOWES INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS:

Scatement of change of registered office or registered agent or both for corporations

| statement of cha | provisions of sections 607.0502, 617 nge is submitted for a corporation o r to change its registered office or re | organized under the law | vs of the State | of DE | _ |
|--|--|--|---|---|--------------------|
| 1. The name of t | he corporation: WHEELER FINANC | CIAL FROM PITNEY B | OWES INC. | | |
| 2. The principal | office address: PARKSIDE TOWER | 215 SOUTH STATE | STREET SU | ITE 320 Salt Lake (| — City, UT |
| 3. The mailing a | ddress (if different): | | | | <u> </u> |
| 4. Date of incorp | poration/qualification: 07/11/2019 | Document r | number: F190 | 000003190 | |
| 5. The name and | I street address of the current registe timent of State: (If resigned, enter re | red agent and registere | d office on fil | e with the | |
| | CT CORPORATION SYSTEM | | | | |
| | 1200 SOUTH PINE ISLAND ROA | ۷D | | _ | |
| | PLANTATION | FL | 33324 | 2022 SEC TA | |
| 6. The name and (if changed): | street address of the new registered | agent (if changed) and | l /or registered | 77 | |
| | Corporation Service Company | | | AM 9: 47 OF STATE SEEE, FI | J |
| | 1201 Hays Street | | | FA + | |
| | P: Tallahassee | O Box NOT acceptable FL | 32301 | m - | |
| The street addre | ss of its registered office and the st | | | of its registered age | nt. |
| Such change wa authorized by th | s authorized by resolution duly add te board, or the corporation has bee | opted by its board of d en notified in writing o | irectors or by f the change. | an officer so | |
| Signatu | e at an other or director | JILL CILMI | ed or typed name a | VICE PRESI | DENT — |
| I further agree t of my duties, an document is beit corporation has | the appointment as registered ager o comply with the provisions of all of I am familiar with and accept the ing filed merely to reflect a change been notified in writing of this cha n Service Company | statutes relative to the cobligation of my posi in the registered office | this capacity, e proper and ition as regist e address, I h | complete performa tered agent. Or if ereby confirm that | nce this the |
| By: Signature of Registered Agent | | 05/27/2022 | Date | | - |
| | half of an entity: | | | | |
| | BY, ASST. VICE PRESIDENT | | | | |
| | eped or Printed Name | | | | |

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