P190000033333

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
PICK-OP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.





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SECRETARY OF STATE

2020 FEB 13 AM 8: 28 FFB 13 PH 4-18

O SIMMONS FEB 1 4 2020



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date: 02/13/2020	
Name: Merritt Walker	
Reference #:	
Entity Name: REL	ATIENT, INC.
Articles of Incorporation/Authorization	on to Transact Business
Amendment	
✓ Change of Agent	
Reinstatement	
Conversion	
☐ Merger	
☐ Dissolution/Withdrawal	
Fictitious Name	
Other	
Authorized Amount: \$35	
Signature: , , , , , , , , , , , , , , , , , , ,	

P: •852.2682.9633

F: +B52.2682.9790



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	02/13/2020	
	Merritt Walker	
	1185210	
	:R	ELATIENT, INC.
	es of Incorporation/Authoriz	
☐ Amer	ndment	
✓ Chan	ge of Agent	
Reins	statement	
☐ Conv	ersion	
☐ Merg	er	
☐ Disso	olution/Withdrawal	
☐ Fictiti	ous Name	
Other		
Authorized A	Amount: \$35	
Signature:	MIN	

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

1. The name of	the corporation:	F	RELATIENT, IN	IC.
2. The principal	office address: No	Change		
3. The mailing a	address (if different):_			
4. Date of incor	poration/qualification	July 11, 2019	Document number:	F1900000333
		current registered agent signed, enter resigned)	t and registered office or	n file with the
	CORPOR	RATION SERVI	CE COMPANY	
		1201 HAYS ST	REET	(6)
	TALLA	HASSEE, FL	32301-2525	XECR Tal
6. The name and (if changed):			f changed) and /or regist	$\frac{1}{2}$
	COGENCY	GLOBAL INC	·	AH 8:
	115 North C	P.O. Box NOT accep		33 ATE
	Tallahasse	e, FL 32301	ontole	
The street addreas changed will	ess of its registered of be identical.	ffice and the street addi	ress of the business offi	ce of its registered age
Such change wa authorized by th	as authorized by resol he board, or the corpo	ution duly adopted by eration has been notifie	its board of directors or d in writing of the chan	by an officer so ge.
/s/ Patrick BI			Patrick Block	Authorized Person
	are of an officer of director the appointment as r to comply with the pr	ovisions of all statutes	Printed or typed not ree to act in this capact relative to the proper a of the obligation of my p	ity. nd complete position as registered
I hereby accept I further agree performance of agent. Or, if th	my duities, and Lam j is document is being	filed merely to reflect a has been notified in wr	i change in the register iting of this change.	
I hereby accept I further agree performance of agent. Or, if th	my duties, and I am j is document is being that the corporation	filed merely to reflect a	i change in the register iting of this change. 2/13/2020	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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

Typed or Printed Name