

3/11/2020

**F19000064058**

Division of Corporations  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6380

From: Account Name : LEGALINC CORPORATE SERVICES INC.  
Account Number : 120180000011  
Phone : (844)386-0178  
Fax Number : (214)317-4754

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STATE OF FLORIDA  
DIVISION OF CORPORATIONS

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

2020 MAR 12 PM 8:38

**REGISTERED AGENT CHANGE  
STATISTA INC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

MAR 13 2020

J ALBRITTON

**RACH**

Electronic Filing Menu

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Help

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

((H20000081722 3)))

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

1. The name of the corporation: STATISTA INC.

2. The principal office address: 55 BROAD STREET, 30TH FLOOR, NEW YORK, NY 10004

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 08/27/2019 Document number: F19000004058

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)

PLATINUM FILINGS LLC

155 OFFICE PLAZA DR.

TALLAHASSEE, FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

LEGALINC CORPORATE SERVICES INC.

5237 SUMMERLIN COMMONS BLVD, SUITE 400

P.O. Box NOT acceptable

FORT MYERS, FL 33907

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.

Manuel Moerbach  
Signature of an officer or director

MANUEL MOERBACH, PRESIDENT

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.

Nancy Luna  
Signature of Registered Agent

3/11/2020

Date

If signing on behalf of an entity:

Nancy Luna

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)

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