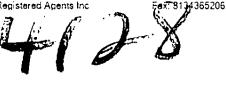
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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

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REGISTERED AGENT CHANGE REINSTITUTE, INC.

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

statement of cha	unge is submitted for a corporation	17,0502, 607,1508, or 617,1508, Florida S organized under the laws of the State of $\frac{C}{2}$ registered agent, or both, in the State of F	Connecticut		
1. The name of t	the corporation: REINSTITUTE INC				_
2. The principal	office address:				-
3. The mailing a	ddress (if different):				-
4. Date of incorp	of incorporation/qualification: 09/06/19 Document number: F19000004128			_	
	I street address of the current regist tment of State: (If resigned, enter r	ered agent and registered office on tile wiesigned)	th the		
	REGISTERD AGENTS INC.				
	7901 4TH ST N., STE 300				
	ST PETERSBURG, FL 33702		- X.	2023	
6. The name and (if changed):	I street address of the new registere	d agent (if changed) and /or registered off	LITAHAS	2023 SEP 20	, 1000 ,
	Northwest Registered Agent LLC		*		
7901 4th St N STE 300			بو د		
	St. Petersburg FL 33702	PO Box NOI acceptable	. ਜੋ	34	
The street addre	ess of its registered office and the be identical.	street address of the business office of its	s registere	d agent	
Such change wa authorized by th	is authorized by resolution duly ac ne board, or the corporation has be	dopted by its board of directors or by an electron notified in writing of the change.	officer so		
Signatur	re of an officer or director	Nat Smith, Incorporator Printed or typed name and but	Nat Smith, Incorporator Printed or typed trame and title		
I further agrée t of my duties, an document is bei	to comply with the provisions of as d I am familiar with and accept th	mt and agree to act in this capacity. It statutes relative to the proper and com we obligation of my position as registered i in the registered office address, I horeb unge.	i agent. C)r, if thu	S
Toplar Non	~	09/20/2023			
-/- Sign	nature of Registered Agent	Date	Date		
If signing on be	half of an entity:				
Taylor Newman					
- Is	ped or Printed Name				