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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

Email Address:

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## REGISTERED AGENT CHANGE WIND TALKER INNOVATIONS, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

JUN 2 5 2021

S. PRATHEF

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

	-	, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ion organized under the laws of the State of Delaware	
	= = = = = = = = = = = = = = = = = = = =	or registered agent, or both, in the State of Florida.	
1. The name of t	he corporation: Wind Talker In	novations, Inc.	
2. The principal	office address: 510 L STREET	SUITE 210 ANCHORAGE, AK 99501	<del></del>
4. Date of incorp	poration/qualification: 11/20/20	19 Document number: F19000005277	
	I street address of the current rep tment of State: (If resigned, ento	gistered agent and registered office on file with the er resigned)	
	REGISTERED AGENTS INC.		TALL COCT
	7901 4TH ST N STE 300		LAHA
	ST. PETERSBURG, FL 33702		SSE -
6. The name and (if changed):	street address of the new regist	tered agent (if changed) and /or registered office	ALLAHASSEE, FLORI
	United Agent Group Inc.		<u> </u>
	801 US Highway 1		
		P.O. Box NOT acceptable	
	North Palm Beach, FL 33408		
-		he street address of the business office of its registered y adopted by its board of directors or by an officer so seen notified in writing of the change.	agent,
authorized by th	ne board, or the corporation has	s been notified in writing of the change.	
Zu		Lauren Underwood, Attorney-in-Fact	
I hereby accept I further agree t of my duties, an document is bei	the appointment as registered to comply with the provisions of d I am familiar with and accep ng filed merely to reflect a chu been notified in writing of this	agent and agree to act in this capacity, of all statutes relative to the proper and complete perfor the obligation of my position as registered agent. Or, age in the registered office address, I hereby confirm the schange.	mance if this out the
Luu		06/24/2021	
Sign	nature of Registered Agent	Date	
If signing on bel	half of an entity:		
Lauren Underwo	od, Special Secretary		
'r <sub>y</sub>	ped or Printed Name	<del></del>	

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