F19000005465

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

Office Use Only



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10/02/20--01021--005 **35.00

KARLICHE

NOV 13 2020 I ALBRITTON



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Carissa Koetitz carissa.koetitz@cscglobal.com

Date: September 30, 2020

Order#: 441679-015

Re: ASSETIC INC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX __ File in your office on a routine basis.

XX Issue Proof of Filing.

XX___ Please return evidence to the following:

Attn: Carissa Koetitz c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	nge is submitted for a corporati	, 617.0502, 607.1508, or 617.1508. Florida Statutes ion organized under the laws of the State of <u>WASH</u> I or registered agent, or both, in the State of Florida.	
	he corporation: ASSETIC INC		
2. The principal	office address: 11000 REGENC	CY PARKWAY, SUITE 110, CARY, NC 27518	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 12/10/20	Document number: F19000005465	
	I street address of the current reg tment of State: (If resigned, ente	gistered agent and registered office on file with the er resigned)	
	COGENCY GLOBAL INC.		
	115 NORTH CALHOUN STR	EET SUITE:4	51. JOCT
	TALLAHASSEE	FL 32301	2
6. The name and (if changed):	d street address of the new regist	tered agent (if changed) and /or registered office	
	Corporation Service Company	у	⊕ ⊕
	1201 Hays Street		ယ
		P.O Box NOT acceptable	
	Tallahassee	FL 32301	
The street addre	ess of its registered office and t be identical.	he street address of the business office of its regist	ered agent.
· ·	as authorized by resolution dul- ne board, or the corporation has	y adopted by its board of directors or by an officer s been notified in writing of the change.	so
kevin kemmen		Kevin Kemmerer Interim C	EO
I further agree to of my duties, an document is bei corporation has	to comply with the provisions of ad I am familiar with and accept	agent and agree to act in this capacity. If all statutes relative to the proper and complete point the obligation of my position as registered agent and the registered office address. I hereby confiss change.	. Or. it this
By: X) NO.	nature of Registered Agent	09/30/2020 Date	
	half of an entity:	() dic	
Grace E. Kirby,	Asst. Vice President		
T	yped 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)