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COVER LETTER

TO:

Amendment Section Division of Corporations

STIP INCIT. Change of Registered Agent	rawk consulting Group, Inc				
Name of Corporation	The Correction (2-1007)				
DOCUMENT NUMBER: F200000	0814				
The enclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this i	matter to the following:				
Kai M. Joy					
Name of Contact Person					
RedHawk Consulting Group, Inc.					
Firm/Company					
4830 W. Kennedy Blvd, Suite 600					
Address					
Tampa, Florida 33609					
City/State and Zip Code					
kaijoy@consult-redhawk.com					
E-mail address: (to be used for future annual t	report notification)				
For further information concerning this matter, plo	ease call:				
Kai M. Joy	at (813) 733-9125 Area Code & Daytime Telephone Number				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the D	Department of State.				
Mailing Address:	Street Address:				
Amendment Section	Amendment Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327 The Centre of Tallahassee					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

мистет ој с	iange is submitte	ections 607,0502, 61 ed for a corporation registered office or t	organized und	er the laws of the	Centar of Illinois	this
		RedHawk Consultin			,	
		4830 W. Kennedy B		ampa, Florida 3360)9	
3. The mailing	address (if differ	rent):				
4. Date of incom	rporation/qualific	cation: 02/03/2020	Do	cument number: F	200000000814	·— ·— ·
5. The name an	d street address	of the current registe (If resigned, enter re	red agost and	registered office or	n file with the	
	Ashley Gehrig		,			
	222 S. Malcoim	ı Cı.				
	Tampa, Florida	33609			SECULLA TALLA	
6. The name and (if changed):		of the new registered	agent (if chang	ged) and /or registe	ered office.)
	Kai M. Joy			_ _	- SEE	3 1
	4830 W. Kenned	dy Blvd, Suite 600			<u> </u>	ม อ
	Tampa, Florida). Box NOT accepte	ible	FT: V	J
The street address changed will	ss of its register be identical.	red office and the str	reet address of	the business office	ce of its register	ed agent,
authorized by th	e board, or the c	resolution duly ado corporation has beer		ard of directors or riting of the chang	by an officer so ge.	,
Signatur	e of an afficer of direc	ior	Director	Date of the second		
I hereby accept to further agree to of my duties, and document is better corporation has	the appointment comply/with the Lam familiar with the pfiled merely to them notified in	as registered agent the provisions of all s with and accept the waith the oreflect a change in writing of this chan	t and agree to statutes relativ obligation of n of the registered ige.	Printed or typed nan act in this capacit be to the proper as nv position as reg d office address. I	ne and title ly: id complete perf istered agent. (hereby confirm	formance Or, if this that the
			04/06/203			
	aturd of Registered Ag	}		Date		
If signing on beh	alf of an entity:	1				
KA)	ped or Printed Name	σ>				

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