

F2 000000 2053

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

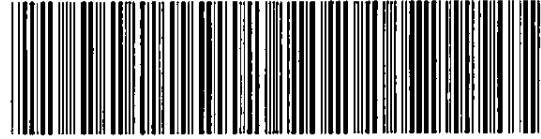
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J. HORNE
DEC - 6 2024

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SECRETARY OF STATE

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: MISTY 1/3

CERTIFIED COPY _____

XX PHOTOCOPY _____

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XX FILING _____

CHANGE OF RA

1. SAAB, INC.

(CORPORATE NAME AND DOCUMENT #)

2. _____

(CORPORATE NAME AND DOCUMENT #)

3. _____

(CORPORATE NAME AND DOCUMENT #)

4. _____

(CORPORATE NAME AND DOCUMENT #)

5. _____

(CORPORATE NAME AND DOCUMENT #)

6. _____

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

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

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

1. The name of the corporation: SAAB, INC.
2. The principal office address: 85 Collamer Crossings Pkwy East Syracuse, NY 13057

3. The mailing address (if different): _____
4. Date of incorporation/qualification: 04/30/2020 Document number: F20000002053
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)

CORPORATE CREATIONS NETWORK INC

801 US HWY 1

NORTH PALM BCH, FL 33408

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

Telos Legal Corp.

155 Office Plaza Dr

P.O. Box NOT acceptable

Tallahassee, FL 32301

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.

Julie Payne

Signature of an officer or director

Julie Payne, Vice 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.

[Signature]

Signature of Registered Agent

1/3/2025

Date

If signing on behalf of an entity:

Susan Boadway

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)