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(Requestor's Name) (Address)	600362894236
(City/State/Zip/Phone #)	03/30/2101031007 **35.00
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Mart



CSC - WILMINGTON · 251 Little Falls Drive Wilmington De 19808

> 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Tiffany Brown tiffany.brown@cscglobal.com

.

Date: March 25, 2021

Order#: 721419-004

Re: KOUNT INC.

Enclosed please find:

<u>XX</u> Change of Registered Agent and Office. <u>XX</u> Check in the amount of \$35.

Please take the following action:

<u>XX</u>	File in your office on a routine basis.
XX	Issue Proof of Filing.
XX	Please return evidence to the following:

Attn: Tiffany Brown 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

I. The name of t	he corporation: KOUNT INC.			
	office address: ST BOISE ID 83702			
3. The mailing a	ddress (if different):			
4. Date of incorporation/qualification: 06/29/2020 Document number: F20000002912				
5. The name and	street address of the current registered agent a tment of State: (If resigned, enter resigned)			
	C T CORPORATION SYSTEM			
	1200 SOUTH PINE ISLAND ROAD			
	PLANTATION	FL 33324		
6. The name and (if changed):	street address of the new registered agent (if cl	hanged) and /or register	red office	
	Corporation Service Company		21	
	1201 Hays Street		T B T	
	P.O. Box NOT a	cceptable		
	Tallahassee	FL 32301	m õ	
The street addre as changed will	P.O Box NOT a Tallahassee ss of its registered office and the street addres be identical.	s of the business office	e of its registered agent.	

Such change was authorized by resolution duly adopted by its board of directors or by an officer seatther authorized by the board, or the corporation has been notified in writing of the change.

Signature of an officer or director

Jill Cilmi, Vice President

Printed or typed name and title

Date

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. Thereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company Bγ $\overline{N}\overline{N}$ Signature of Registered Agent

03/25/2021

If signing on behalf of an entity:

Grace E. Kirby

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)