Division of Corporations Electronic Filing Cover Sheet

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(((H230004136343)))



H230004136343ABC-

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274

Fax Number : (888)706-7274

													,
**Enter	the	email	address	for	this	business	entity	to	be	used	for	futu	re
						only one							<u>'</u> _

Email	Address:			

REGISTERED AGENT CHANGE SUPERPEDESTRIAN, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu



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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Superpedestrian, Inc.	
Name of Corporation	_
DOCUMENT NUMBER: F2000005352	_
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for	filing.
Please return all correspondence concerning this matter to the following:	-
Lori Whalen	
Name of Contact Person	202
Registered Agent Solutions, Inc.	2023 DEC -4
Firm/Company	EC .
Corporate Center One, 5301 Southwest Pkwy, Ste 400	
Address	38
Austin, Texas 78735	
City/State and Zip Code	AM 9: 27
E-mail address: (to be used for future annual report notification)	<u> </u>
For further information concerning this matter, please call:	
Lori Whalen at (888) 705-7274	
Name of Contact Person Area Code & Daytime Tele	phone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	provisions of sections 60 inge is submitted for a co r to change its registere	orporation organized	l under the la	ws of the State of	Delaware	
1. The name of t	the corporation: Super	pedestrian, Inc	•	·	wanta as was in the	
2. The principal	office address: 84 HA	AMILTON ST.	CAMBRIL	OGE, MA 02	139	_
-	ddress (if different):					
4. Date of incorp	oration/qualification: 1	2/2/2020	_ Document:	number: F2000	00005352	
The name and Florida Depar	l street address of the cu tment of State: (If resign	rrent registered agent ned, enter resigned)	and registere	ed office on file w	vith the	
	TRAC - THE R	REGISTERED	AGENT (COMPANY	20:	
	236 E. 6TH AVE.		· *		23 DE	
	TALLAHASSEE		FL	32303	2023 DEC -4 P	روستان الاستان آ
6. The name and (if changed):	street address of the ne			d /or registered of		
	2894 Remingto	on Green Ln.	Ste. A		_	
	Tallahassee	P.O. Box NO FL	32308	3		
The street addre	ss of its registered offic be identical.	ce and the street addi	ress of the bu	siness office of i	its registered ago	ent,
Such change wa authorized by th	s authorized by resolut e board, or the corpora	ion duly adopted by tion has been notific	its board of c d in writing c	lirectors or by an of the change.	officer so	
/s/ Jaclyn	Wright	Jac	dyn Wrigh	ed or typed name and t	Authorized F	erson
l hereby accept i I further agree to of my duties, and document is beir	the appointment as reg o comply with the prov d I am familiar with an ng filed merely to reflec been notified in writing	istons of all statutes d accept the obligati ct a change in the rec	ree to act in	this canacity		ince this the
Ma	الك روم	1	2/4/2023			
_	ature of Registered Agent	-		Date		
lf signing on bel	nalf of an entity:					
	r. Assistant Secretary					
ly	ped or Printed Name	+ + CH INC CEC. 4	***			

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