Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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REGISTERED AGENT CHANGE UMLAUT, INC.

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DEC 01 2021

A. LUNT

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Help

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

		617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of COLORADO	
		or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: UMLAUT, INC.		
	office address: 1225 SPARTAN S		
	GHTS, MI 48071		
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 02/08/202	21 Document number: F21000000780	
5. The name and Florida Depar	d street address of the current reg riment of State: (If resigned, ente	istered agent and registered office on file with the resigned)	20'
	C T CORPORATION SYSTEM		2021 NOV
	1200 SOUTH PINE ISLAND RO)AD	0V 30
	PLANTATION, FL 33324		
6. The name and (if changed):	I street address of the new registe	tred agent (if changed) and /or registered office	AM IO: 1
	CORPORATE CREATIONS NE	TWORK, INC.	
	801 US HIGHWAY I	-	
		P.O. Box NOT acceptable	
	NORTH PALM BEACH, FL 334		
-		e street address of the business office of its registered	agent,
Such change wa authorized by th	as authorized by resolution duly ne board, of the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.	
		Adia Myles, Attorney-in-fact	
•	re of an officer of enfector	Printed or typed name and title	
hereby accept further agree of my duties, an accument is bei corporation has	the appointment as registered a to comply with the provisions of a I am familiar with and accept ng filed merely to reflect a chan been notified in writing of this	igent and agree to act in this capacity. All statutes relative to the proper and complete perfor the obligation of my position as registered agent. Or, ige in the registered office address, I hereby confirm th change.	mance if this at the
	Wes	11/30/2021	
	native of Registered Agent	Date	
	half of an entity:		
Adia Myles, Spe	· · · · · · · · · · · · · · · · · · ·	_	
13	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)



November 30, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

UMLAUT, INC. 1225 SPARTAN ST MADISON HEIGHTS, MI 48071US

SUBJECT: UMLAUT, INC. REF: F21000000780

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Valerie Herring FAX Aud. #: H21000434415 Regulatory Specialist III Letter Number: 421A00028721