## **Division of Corporations Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

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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 future annual report mailings. Enter only one email address please.\*\*

Email Address:

## REGISTERED AGENT CHANGE CORNING DATA INTERNATIONAL, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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Corporate Filing Menu

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TO:

## **COVER LETTER**

Amendment Section Division of Corporations

Name of Corporation	
DOCUMENT NUMBER: F21000001476	
The enclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing
Please return all correspondence concerning this matter t	o the following:
Mary Castillo	
Name of Contact Person	
Registered Agent Solutions, Inc.	
Firm/Company	
5301 Southwest Pkwy Suite 400	
Address	
Austin, Texas 78735	
City/State and Zip Code	

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

For further information concerning this matter, please call:

Name of Contact Person

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

Amendment Section
Division of Corporations

Area Code & Daytime Telephone Number

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

Mary Castillo

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

statement of cha	inge is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florida Statutes, this attion organized under the laws of the State of North Carolina e or registered agent, or both, in the State of Florida.
1. The name of	the corporation: CORNING DA	ATA INTERNATIONAL, INC.
2. The principal Raleigh, NC 276	office address: 421 Fayettevile	St Suite 1100
***************************************	address (if different): PO Box 3	.0339 Greenville, NC 27833
		021 Document number: F21000001476
	d street address of the current returnent of State: (If resigned, en	egistered agent and registered office on file with the nter resigned)
	REGITERED AGENT SOLUT	TIONS, INC.
	155 OFFICE PLAZA DR., STI	E A
	TALLAHASSEE, FL 32301	
6. The name and (if changed):	I street address of the new regis	stered agent (if changed) and /or registered office
	Registered Agent Solutions, Inc	c
	2894 Remington Green Ln. Ste	. A
·		P.O. Box NOT acceptable
	Tallahassee, FL 32308	
The street address changed will	ess of its registered office and be identical.	the street address of the business office of its registered agent,
_		ly adopted by its board of directors or by an officer so as been notified in writing of the change.
lsl Mackenzie Hibler		Mackenzie Hibler. Authorized Person
Signatu	re of an officer or director	Printed or typed name and title
l further agree ( of my duties, an docúment is bei	to comply with the provisions d I am familiar with and acce	I agent and agree to act in this capacity. of all statutes relative to the proper and complete performance pt the obligation of my position as registered agent. Or, if this ange in the registered office address. I hereby confirm that the is change.
Mai		12/22/2023
Sig	not fif Registered Agent	Date
If signing on be	half of an entity:	
Mackenzie Hible	r, Assistant Secretary	
T	sped or Printed Name	<del>_</del>