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partition of Corporations
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To:	Division of Corporations		2 0
		: (850)617-6380	2023 DEC SAND A
From:)
	Account Name	: C T CORPORATION SYSTEM	
	Account Number	: FCA000000023	28
	Phone	: (614)280-3338	
	Fax Number	: (614)573-3996	PA I
'*Enter an	the email addres	ss for this business entity to be ings. Enter only one email address	
	ail Address:		

REGISTERED AGENT CHANGE WEBHELP CALIFORNIA INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43,75

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Help



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

Ts:

By:

statement of cha	provisions of sections 607,0502, 617 inge is submitted for a corporation o	rganized under the laws of the Si	tate of <u>Calif</u>	ornia
	r to change its registered office or re WERNEL B.C.A. 150		ate of Florid	II.
1. The name of t	the corporation: WEBHELP CALIFO	NNIA INC.		
2. The principal	office address: 200 MADISON AVENUE YORK, NY 10016	STE, 1901 NEW		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 04/16/2021	Document number: F	2100XXX)214;	3
	I street address of the current register trient of State: (If resigned, enter re-		i file with th	e
	UNIVERSAL REGISTERED AGEN	TS INC		
	1317 CALIFORNIA STREET			
	TALLAHASSEE, FL 32301		<u></u>	20
6. The name and (if changed):	I street address of the new registered	agent (if changed) and /or regist		F 1
	C T Corporation System			28
	1200 South Pine Island Road		(f)	
	Plantation, Florida 33324	O. Box NOT acceptable		PH 4: 4.2
The street addre	ess of its registered office and the st be identical.	reet address of the business offi	ice of its reg	zistered agent.
Such change wa authorized by th	as authorized by resolution duly add the board, or the corporation has bee	opted by its board of directors on a notified in writing of the cham	r by an offic ige.	er so
de		Lane Lan, Vice President, I	.egal/Corpor	rate Governan
I hereby accept I further gover	the appointment as registered ager to comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change been notified in writing of this cha System	sintules relative to the proper o	rity. and complete	e performance ent. Or, if this infirm that the
Sign	nature of Registered Agent	Date		
If signing on be	half of an entity:			
SEAN L. EMER	ICK, ASSISTANT SECRETARY			
T	yped or Printed Name	'		

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