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A. BUTLER
JUL 15 2022

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	: I2000000195		
REFERENCE	: 803801 8014577		
AUTHORIZATION	: Spelled man.		
COST LIMIT	: \$ 35.00		
ORDER DATE : July 14, 2022			
ORDER TIME : 10:52 AM			
ORDER NO. : 803801-005			
CUSTOMER NO: 8014577			
	• • • • • • • • • • • • • • • • • • • •		
CHANGE OF AGENT			
NAME TYPE OF TAR	T. V.O.		
NAME: JUMP CLEAR, 1	INC.		
PLEASE RETURN THE FOLLOWING AS	S PROOF OF FILING:		
CERTIFIED COPY XX PLAIN STAMPED COPY			
AA FLAIN STAMPED COPY			
CONTACT PERSON: Eyliena Baker	r		
EX	XAMINER'S INITIALS:		

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

statement of change is submitted for a corporati	617.0502, 607.1508, or 617.1508, Florida Statute on organized under the laws of the State of COLC or registered agent, or both, in the State of Florida		
1. The name of the corporation: JUMP CLEAR, I			
2. The principal office address:			
1600 GLENARM PLACE - APT. 2708 DENVE	R, CO 80202		
3. The mailing address (if different): 14232 BLA	CKBERRY DRIVE WELLINGTON, FL 33413		_
4. Date of incorporation/qualification: 10/15/20	CO40000E007		
	gistered agent and registered office on file with the		
CORPORATE CREATIONS	NETWORK, INC.		
801 US HWY 1		20 S	
NORTH PALM BEACH	FL 33408	OZZ JUL 14 SEÇRETAS	[
6. The name and street address of the new regist (if changed):	tered agent (if changed) and /or registered office	LI4 AM	
Corporation Service Compan	ıy	IIO: 43	(
1201 Hays Street	- -	13 143	
	P.O Box NOT acceptable		
Tallahassee	FL 32301		
as changed will be identical.	the street address of the business office of its regis		
Such change was authorized by resolution dul authorized by the board, or the corporation has	y adopted by its board of directors or by an office is been notified in writing of the change.	r so	
Smill It		esident	
document is being filed merely to reflect a chacorporation has been notified in writing of thi Corporation Service Company By: Audum Vic Privates	of all standes retailive to the profes take complete of the obligation of my position as registered agei ange in the registered office address. I hereby con	performance nt. Or, if this afirm that the	
Signature of Registered Agent If signing on behalf of an entity:			
Grace E. Kirby, Asst. Vice President Typed or Printed Name			

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