



Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000200240 3)))



H230002002403AECN

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Tα:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845

Phone : (954)208-0845 Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

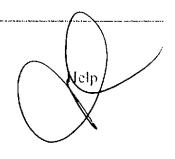
REGISTERED AGENT CHANGE IPKEYS POWER PARTNERS, INC.

Certificate of Status	()
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

1123 JULY -2 PH 12. F.

Electronic Filing Menu

Corporate Filing Menu



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

1. The name	of the corporation: IPKEYS POWER PA	ARTNERS, INC.		
2. The princi	pal office address: 44 Gilbert Street West	, Tinton Falls, NJ 07701		
3. The mailir				
The mailing address (if different): 4. Date of incorporation/qualification: Delaware Document number: F21000006329				
5. The name		ed agent and registered office on file with		
	CORPORATION SERVICE COMPA	NY		
	1201 HAYS STREET			
			2023 2023	
6. The name :		agent (if changed) and /or registered offic	TT: 1	
	C T Corporation System			
			AM 10: 0	
		Bax NOT acceptable		
	Plantation, Florida 33324			
The street ad as changed w	dress of its registered office and the str ill be identical.	reet address of the business office of its r	egistered ag	
Such change authorized by	was authorized by resolution duly ado the board, or the corporation has beer	pted by its board of directors or by an of a notified in writing of the change.	ficer so	
12	٠	Abdullah M. Zeini, Secretary		
I hereby accell further agree of my duties, document is learn to T Corporation I	pt the appointment as registered agent e to comply with the provisions of all a and I am familiar with and accept the seing filed merely to reflect a change in as been notified in writing of this char on System	and agree to act in this capacity statutes relative to the proper and complobilization of my position as registered at the registered office address, I hereby age.	ete performe gent. Or, if confirm that	
SEAN L. EMERICK, A	SSISTANT SECRETARY	05/19/2023		
	Signature of Registered Agent	Date		

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEL, FL 32314 CR2E045 (04/13)