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To:					
	Division of Com	rporations : (850)617-6380			
	m: Account Name Account Number Phone Fax Number er the email addres annual report maili	: REGISTERED AGENT S : I20100000062 : (888)705-7274 : (888)706-7274 s for this business ongs. Enter only one	entity to be used email address ple	ease.** :===================================	2022 AUG - 1 PI
2022 AUG - 1		STERED AGENT N BRAND ECONO			PM 3: 1,8
	Certificate of		0]]	
		Status	0 0		

Estimated Charge

AUG - 2 2022

\$35.00

COVER LETTER

TO: Amendment Section Division of Corporations PRINCETON BRAND ECONOMETRICS, INC. SUBJECT: Name of Corporation F22000000182 DOCUMENT NUMBER: The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Joshua Murphy Name of Contact Person Registered Agent Solutions, Inc. Firm/Company Corporate Center One, 5301 Southwest Pkwy, Ste 400 Address Austin, Texas 78735 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Joshua Murphy at (888) 705-7274 Area Code & Daytime Telephone Number Name of Contact Person

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

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)

⊙ 08/01/2022 7:32 AM ⁴

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

statement of cha	provisions of sections 607.0502, 61 inge is submitted for a corporation or ir to change its registered office or i	organized i	inder the la	ws of the State of	New Yo		-
l. The name of	the corporation: PRINCETON office address: 212 CRANEGIE	BRAND	ECONO	METRICS, I	NC.	3540	
3. The mailing a	address (if different):						
4. Date of incorp	Document number: F2200000182						
5. The name and	d street address of the current register rtment of State: (If resigned, enter re	ered agent a	and registere	ed office on file v	vith the		
	BLUMBERGEXCELSIOR C	ORPOR	ATE SER	VICES, INC.			
	155 OFFICE PLAZA DRIVE	, 1ST FL	•	<u>.</u> "			
	TALLAHASSEE		FL	32301		2022	
6. The name and (if changed):		2022 AUS - 1 PM	41112				
	Registered Agent Solu 155 Office Plaza Dr.	-141 -mv	ယ္				
		O. Box NOT	Suite A		- 7	8	
	Tallahassee	FL	3230	1	_		
=	ess of its registered office and the s be identical. as authorized by resolution duly ad the board, or the corporation has be						nt,
/s/ Lori V	Villis	Lori	Willis		Authori	zed Po	erson
I hereby accept I further accept of my duties, an document is bet corporation has Machine Sign	mature of Registered Agent	ll statutes r le obligation in the reginange.	ee to act in elative to th on of my pos	he proper and co sition as register	mplete per ed agent.	formar Or, if to n that t	ice his he
If signing on be	chalf of an entity:						
	Assistant Secretary						
1	Sped 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)