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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 : (561)694-1639 Fax Number

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

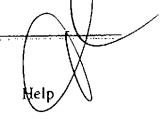
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## REGISTERED AGENT CHANGE D&H CORPORATE GROUP INC.

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JII. 26

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

statement of cha	nge is submitted for a corporat	2, 617.0502, 607.1508, or 617.1508, Florida Statu ion organized under the laws of the State of Penn or registered agent, or both, in the State of Flori	sylvania	
	he corporation: D&H Corporate			
2. The principal	office address: 100 TECH DR.	HARRISBURG, PA 17112		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 08/16/20	022Document number: <u>F2200000517</u>	1	
5. The name and		egistered agent and registered office on file with the		
	REGISTERED AGENT SOLU	TIONS, INC.		
	2894 REMINGTON GREEN LANE, SUITE A			
	TALLAHASSEE, FL 32308			
6. The came and (if changed):	d street address of the new regis	stered agent (if changed) and /or registered office		
	Corporate Creations Network I	nc.	50	
	801 US Highway 1		• •	
	North Palm Beach, FL 33408	P.O. Box NOT soceptable	<b>&gt;</b>	
as changed will	l be identical.	the street address of the business office of its re		
Such change wauthorized by		ly adopted by its board of directors or by an off as been notified in writing of the change.	icer so	
(	John Perez	John Perez, Attorney-in-Pact		
I hereby accept I further agree of my duties, as	we of an other or director  t the appointment as registered to comply with the provisions and I am familiar with and acce ing filed merely to reflect a ch is been notified in writing of the	Printed a typed name and tale  d agent and agree to act in this capacity, of all statutes relative to the proper and comple ept the obligation of my position as registered a lange in the registered office address, I hereby on the change.  07/26/2023	ete performanc gent. Or if this onfirm that the	
	granure of Registered Agent	Date		
If signing on b	chalf of an entity:			
John Perez, Spe		· 		
·	Typed or Printed Name *** F	ILING 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)