F22000005776

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(1.10	01000)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
e tified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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LLAHASSEE, ELTIP

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A. BUTLER NOV 16 2022

COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	ECT: CHATAUQUA LABS, INC. of Corporation	
Name	of Corporation	
DOC	UMENT NUMBER: F22000005776	
The er	nclosed Statement of Change of Registe	red Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning t	his matter to the following:
		Ç
MOIS	ES CARDOSO	
Name	of Contact Person	
FILEJ	ET INC.	
Firm/0	Company	
10440	PIONEER BLVD., SUITE 8	
Addre	ss	
SANT	A FE SPRINGS, CA 90670	
City/S	tate and Zip Code	
	REGISTEREDAGENT@	FILEJET.COM
E-ma	il address: (to be used for future ann	ual report notification)
For fu	rther information concerning this matte	er, please call:
MOIS	ES CARDOSO	21 (949) 259-5955
	Name of Contact Person	at (949)259-5955 Area Code & Daytime Telephone Number
Enclo	sed is a \$35.00 check made payable to t	the Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

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

Tallahassee, FL 32303

CR2E045 (04/13)

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

• •	607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this a corporation organized under the laws of the State of DELAWARE	
in order to change its registe	ered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: CHA	TAUQUA LABS, INC.	
The name of the corporation: CHATAUGUA EABS, INC. The principal office address: LETTERMAN DRIVE, SUITE C3500, SAN FRANCISCO, CA 94129		
3. The mailing address (if different):		
4. Date of incorporation/qualification	9/14/2022 Document number: F22000005776	
5. The name and street address of the Florida Department of State: (If res	current registered agent and registered office on file with the	
CORPORATION SEI	RVICE COMPANY	
1201 HAYS STREET		
TALLAHASSEE, FL	.32301-2525	
	new registered agent (if changed) and /or registered office	
FILEJET INC.		
625 E. TWIGGS STR	EEET, SUITE 110	
	P.O. Box NOT acceptable	
TAMPA, FL 33602-3	931	
The street address of its registered o as changed will be identical.	ffice and the street address of the business office of its registered agent,	
Such change was authorized by reso authorized by the board, or the corporate of the corpora	olution duly adopted by its board of directors or by an officer so oration has been notified in writing of the change.	
Hate Hone	KARTIK HOSANAGAR, CEO	
Signature of an officer of director	Printed or typed name and title	
I hereby accept the appointment as if I further agree to comply with the proof my duties, and I am familiar with document is being filed merely to recorporation has been notified in writer.	registered agent and agree to act in this capacity. rovisions of all statutes relative to the proper and complete performance and accept the obligation of my position as registered agent. Or, if this flect a change in the registered office address. I hereby confirm that the ting of this change.	
Kludi	11/11/2022	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
ANDREW WHITE		
Typed or Printed Name		

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