## F64205

(R	equestor's Name)	
(A	ddress)	
	ddress)	
(A	uaress)	
(C	ity/State/Zip/Phone #)	
		MAIL
(B	usiness Entity Name)	
(0	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to Fil	ing Officer:	



FTI ED 2024 SEPTI FTI ED 2024 SEPTI FTI ED

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Office Use Only

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

1. The name of the corporation: JONBRO, INC.

2. The principal office address: 9313 E 34TH STREET NORTH #100 WICHITA, KS 67226

- 3. The mailing address (if different): <u>JONBRO, INC 9313 E 34TH STREET NORTH, SUITE #100 WICHITA, KS 67226</u>
- 4. Date of incorporation/qualification: 01/22/1982 Document number: F64205
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

	C T CORPORATION SYSTEM				
	1200 SOUTH PINE ISLAND ROAD			2024	
	Plantation	FL 33324		SEP	·· <del>··</del>
6. The name and (if changed):	street address of the new registered agent	(if changed) and /or registered	office	Pii	LED
	Corporation Service Company		ו- אני: איי:	ដ្	
	1201 Hays Street		- · · ·	ف	
	P.O. Box S	SOT acceptable			
	Tallahassee	FL 32301			

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

/S/ Alan E Seiwert	Alan E Seiwert	CFO
Signature of an officer or director	Printed or typed na	me and tatle

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. Thereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company

By: N01 Signature of Registered Agent

If signing on behalf of an entity:

GRACE E. KIRBY, ASST. VICE PRESIDEN	GRACE E	. KIRBY,	ASST.	VICE	PRESID	ENT
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Typed 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) 629636-7

09/10/2024

Date