F95000000483

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone #j)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Name)	,		
(Document Number)				
Certified Copies		: Status		
Certified Copies	_ Certificates of	- Status		
Special Instructions to Filing Officer:				





100386090941

DIVISION OF COMPORATIONS TALLAHASSEE, FLORIDA

VECEIVED

A. BUTLER APR 2 1 2022 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195					
REFERENCE : 628124 8370815					
AUTHORIZATION: Spelle le man					
COST LIMIT : \$35,00					
ORDER DATE : April 19, 2022					
ORDER TIME : 12:24 PM					
ORDER NO. : 628124-030					
CUSTOMER NO: 8370815					
CHANGE OF AGENT					
NAME: TELEGRATION, INC.					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Eyliena Baker					
EXAMINER'S INITIALS:					

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statu n organized under the laws of the State of DEL	AWARE	
in orde	r to change its registered office or	registered agent, or both, in the State of Floria	la.	
1. The name of t	he corporation: TELEGRATION, I	INC.		
2. The principal 905 W. MAPLE	office address:ROAD, CLAWSON, MI 48017			
3. The mailing a	ddress (if different):			
4. Date of incorp	oration/qualification: 01/27/199	5 Document number: F950000004	183	
	l street address of the current regis tment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	e	
	C T CORPORATION SYSTEM			
	1200 SOUTH PINE ISLAND RO	DAD		
	PLANTATION	FL 33324	20: SE	
6. The name and (if changed):	Ū	ed agent (if changed) and /or registered office	97 9 E. 2022 APR 20 SECRETARY	
	Corporation Service Company	で) 		
1201 Hays Street		in		
	Tallahassee	P.O Box NOT acceptable FL 32301	50	
The street addre	ss of its registered office and the be identical.	street address of the business office of its reg	istered agent,	
Such change wa authorized by th	s authorized by resolution duly a se board, or the corporation has b	adopted by its board of directors or by an offic- seen notified in writing of the change.	er so	
Mark Liu		Mark Liu, Secretary	Mark Liu, Secretary	
	e of an officer or director	Printed or typed name and title		
I further agree to of my duties, and document is bein corporation has	the appointment as registered ag o comply with the provisions of a d I am familiar with and accept t ng filed merely to reflect a chang been notified in writing of this c n Service Company	gent and agree to act in this capacity. all statutes relative to the proper and complete the obligation of my position as registered age to in the registered office address, I hereby con hange.	e performance out. Or, if this ofirm that the	
By: Lina	co Cokubie	April 18, 2022		
	nature of Registered Agent	Date	,	
If signing on be	half of an entity:			
	Asst. Vice President	-		
Ту	ped or Printed Name	NG PPP CYC 00 + + +		
	* * * FILI!	NG 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)