F950000002277

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2022 MAY 12 AM 11: 25
DIVISION OF COMPORATIONS

CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 655108 5057753					
AUTHORIZATION : John Comments					
COST LIMIT : (\$\35.00					
ORDER DATE: May 3, 2022					
ORDER TIME : 8:30 AM					
ORDER NO. : 655108-013					
CUSTOMER NO: 5057753					
CHANGE OF AGENT					
NAME: CIRCASUB, INC.					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY					
XX PLAIN STAMPED COPY					
CONTACT PERSON: Alexxis Weiland					
EXAMINER'S INITIALS:					

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

statement of cha	provisions of sections 607.0302, 617.030 nge is submitted for a corporation organ r to change its registered office or registe	ized under the law	vs of the State of New	w York	
The name of t The principal	he corporation: CIRCASUB, INC. office address: 400 Interpace Parkway,	Bldg. A, Parsippa	any, NJ 07054		
-	· · · · · · · · · · · · · · · · · · ·				
4. Date of incorp	poration/qualification: 05/09/1995	Document r	number: <u>F950000022</u>	:77	
	street address of the current registered at tment of State: (If resigned, enter resigne	•	d office on file with th	e	
	Corporate Creations Network Inc.				
	801 US Highway 1				
	North Palm Beach	FL	33408		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Corporation Service Company 1201 Hays Street					
	1201 Hays Street			12 RY MASS	
P.O. Box NOT acceptable					
	Tallahassee	FL	32301	STA	
as changed will			_		
Such change wa authorized by th	s authorized by resolution duly adopted e board, or the corporation has been not	by its board of d ified in writing o	irectors or by an offic f the change.	er so	
	. E. aguer_	Jill Cilmi, Vice I			
I hereby accept to I further agree to of my duties, and document is being corporation has	the appointment as registered agent and comply with the provisions of all statuted to a comply with the provisions of all statuted to a comply with the provisions of all statuted to a comply the colling filed merely to reflect a change in the been notified in writing of this change. Service Gompany		d or typed name and title his capacity, e proper and complete tion as registered age address, I hereby co.	e performance ent. Or, if this nfirm that the	
By: (Ri	m Leil	05/06/2022			
Sign If signing on bel	ature of Registered Agent ualf of an entity:		Date		
Ami M. Casper	Asst. Vice President				
	ped or Printed Name				

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