Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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Account Name : COMPUTERSHARE Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

Email	Address:	<u>-</u>		

REGISTERED AGENT CHANGE **TYNET CORPORATION**

Certificate of Status	0		
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Page Count	02		
Estimated Charge	\$35.00		

Electronic Filing Menu Corporate Filing Menu

Help

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

statement of cha	nnge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Delaware egistered agent, or both, in the State of Florida.				
The name of	the corporation: TYNET CORPORA	TION				
2. The principal	office address: 2200 DON TYSON F	PARKWAY, CP131, SPRINGDALE, AR 72762				
	address (if different): PO BOX 2020,	CP131, SPRINGDALE, AR 72765-2020				
4. Date of incor	poration/qualification: 04/12/1996	Document number: F96000001838				
5. The name and		red agent and registered office on file with the				
	C T CORPORATION SYSTEM					
	1200 SOUTH PINE ISLAND ROAD					
	PLANTATION, FL 33324					
6. The name and (if changed):	d street address of the new registered	l agent (if changed) and /or registered office				
	United Agent Group Inc.					
	801 US Highway 1					
	P (). Box NOT acceptable					
	North Palm Beach, FL 33408					
The street addre as changed will	ess of its registered office and the s be identical.	treet address of the business office of its registered agent,				
Such change wa authorized by the	as authorized by resolution duly ad- he board, or the corporation has bec	opted by its board of directors or by an officer so en notified in writing of the change.				
H	215	Marja Souza, Attorney-in-Fact				
Sigryffu	re of an officer or director	Printed or typed name and title				
l hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered ages to comply with the provisions of ali ad I am familiar with and accept the ing filed merely to reflect a change s been notified in writing of this cha	nt and agree to act in this capacity. I statutes relative to the proper and complete performance e obligation of my position as registered agent. Or, if this in the registered office address. I hereby confirm that the ange.				
h	fature of Registered Agent	12/27/2023				
Silv	nature of Registered Agent	Date				
lf signing on be	chalf of an entity:					
Marja Souza, Sp	·					
Т	yped or Printed Name					
	* * * FILIN	G FEE: \$35.00 * * *				