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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 : (850)521-1000 Phone

Fax Number : (850)558-1575

REGISTERED AGENT CHANGE

STUDIOS ARCHITECTURE, INC.

Certificate of Status	0
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Corporate Filing Menu

Electronic Filing Menu

Help

statement of change is sub	of sections 607.0502, 617.0502, 6 mitted for a corporation organize	d under the laws of the State o	of California
	e its registered office or registered		f Florida.
1. The name of the corpor	ation: Studios Architecture,	, Inc.	
2. The principal office add	ress: 1625 M Street NW, V	Washington, DC 2003	5
3. The mailing address (if	different):		
4. Date of incorporation/q	palification: 4/15/1997	Document number: F97	000001975
5. The name and street add Florida Department of S	iress of the current registered agentate:	at and registered office on file	with the
Albert	T. Gimbel		
Messe	, Caparello & Self, P.A.		
215 \$.	Monroe St., Ste 701, Tall	lahassee, FL 32302	ZOD SEC
6. The name and street add (if changed):	iress of the new registered agent (i	if changed) and /or registered	2000 AUG 13 PM 2 SECRETARY OF STALLAHASSEE, FLO
Corpo	ration Service Company		— EEO
12 0 1 F	Yays Street	·	
	(P.O. Box NOT acceptable)		
<u>Tallah</u>	assee, FL 32301		_ ≥ 5 5
The street address of its i	egistered office and the street add al.	iress of the business office o	f its registered agent,
Such change was authorized by the board,	zed by resolution duly adopted by or the comparation has been notifi	y its board of directors or by ed in writing of the change.	an officer so
Signature of an other	Harden Jun-	Robin P. M. (Printed or typed party)	cNamara, cto
I hereby accept the appoil I further agree to comply of my duties, and I am fai document is being filed m corporation has been not	ntment as registered agent and a with the provisions of all stapute niliar with and accept the obliga erely to reflect a change in the re fled in writing of this change.	gree to act in this capacity, s rejative to the proper and c tion of my position as registe egistered office address, I he	complete performance ared agent. Or, if this reby confirm that the
Corporation Ser By:	210	8/12/2018	F
Signate of the	(intered Agent)	(Dato)	
If signing on bould of an	entity:		
as its a	· · · · · · · · · · · · · · · · · · ·		
(Typed or Print	-	THE LINE WAS AND THE PROPERTY OF THE PROPERTY	k density system staget staget system staget staget s
er framme mit i ferem mit antimite efferen iang	* FILING FEE:	\$35.00 * * *	1. A. 100 Secure and control households (\$150 Secure and \$150