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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

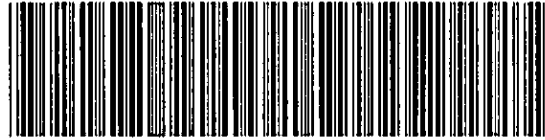
(Business Entity Name)

(Document Number)

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RALPHS

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ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Applied Research Associates, Inc.
Name of Corporation

DOCUMENT NUMBER: F98000000099

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Theresa Rhodes

Name of Contact Person

Applied Research Associates, Inc.

Firm/Company

4300 San Mateo Blvd. NE, Suite A-220

Address

Albuquerque, NM 87110

City/State and Zip Code

trhodes@ara.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Theresa Rhodes

Name of Contact Person

at (505) 881-8074

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of New Mexico in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Applied Research Associates, Inc.

2. The principal office address: 4300 San Mateo Blvd. NE, Suite A-220
Albuquerque, NM 87110

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/13/1979 Document number: F98000000099

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)

Lisa Kirk
430 W. 5th St., Ste. 700
Panama City, FL 32401

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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Laura Quaglino
430 W. 5th St., Ste. 700
Panama City, FL 32401
P.O. Box NOT acceptable

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.

Curt A. Beckemeyer
Signature of an officer or director

Curt A. Beckemeyer, Senior Vice President
Printed or typed name and title

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, I hereby confirm that the corporation has been notified in writing of this change.

Laura
Signature of Registered Agent

10/04/2021
Date

If signing on behalf of an entity:

Laura M. Quaglino
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, TALEAHASSEE, FL 32314