F99 000000 589

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
_
PICK-UP WAIT MAIL
(Dunings Estitutions)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer;

Office Use Only



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2021 MAY -3 AM 10: 35 SECRETARY OF STATE

6/4/2/ SP



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: April 29, 2021

Order#: 779329-116

Re: UNIRISC, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX ___ File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Erika Zavala Daza c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX____ Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of char	orovisions of sections 607.050 nge is submitted for a corpora r to change its registered offic	ution organized under the	laws of the State of $\underline{\ }$	DE	<u> </u>
	he corporation: UNIRISC, INC				
2. The principal	office address: 2000 14th St I	N Ste 500, Arlington, VA 2	22201		
- 3. The mailing a	ddress (if different): 160 Fede	eral Street 4th Floor, Bost	on, MA 02110		
	oration/qualification: 02/01/			00589	
5. The name and	street address of the current r tment of State: (If resigned, e	registered agent and registe			20
	3H AGENT SERVICES, IN	C.		TAC R	21 H
	1415 PANTHER LANE SUI	TE 327		ETAR	AY -3
	NAPLES, FL 34109			ARY OF HASSER	≥
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered offic			:∵·\co	2021 HAY -3 AM 10: 35
	Corporation Service Compa	nny			
	1201 Hays Street				
	Tallahassee	F	L 32301		
The street addre	ss of its registered office and be identical.	the street address of the	business office of its	s registered	agent.
Such change wa authorized by th	s authorized by resolution du e board, or the corporation h	ily adopted by its board o as been notified in writin	f directors or by an og of the change.	officer so	
	Xu E almi	Jill Cilmi, Vice	e President		
Signature of an officer or director			inted or typed name and titl	le	
I further agree to of my duties, and document is beir corporation has	the appointment as registere of comply with the provisions of I am familiar with and according filed merely to reflect a charten notified in writing of the Service Company	of all statutes relative to upt the obligation of my p aunge in the registered off	the proper and com.	plete perfo. Lagent. Or y confirm t	rmance if this hat the
By: 💢	nace t-Kuby	04/28/2021			
Sign	ature of Registered Agent		Date		
If signing on bel	nalf of an entity:				
	Asst. Vice President	_ _			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)

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