## L 78835

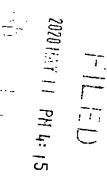
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## COVER LETTER TO: Amendment Section Division of Corporations SUBJECT: INTRACOM U.S.A., INC. Name of Corporation **DOCUMENT NUMBER:** L78835 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: J. Todd Timmerman Name of Contact Person Shumaker, Loop & Kendrick, LLP Firm/Company 101 E. Kennedy Blvd., Suite 2800 Address Tampa, FL 33602 City/State and Zip Code ttimmerman@shumaker.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lori Dyer at (813 ) 221-7426 Area Code & Daytime Telephone Number Name of Contact Person

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

	rder to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	of the corporation: INTRACOM U.S.A., INC.	<del></del>
2. The princip	pal office address: 550 COMMERCE BLVD OLDSMAR, FL 34677	
3. The mailin	ng address (if different):	
4. Date of inc	corporation/qualification: 06/07/1990 Document number: L78835	
	and street address of the current registered agent and registered office on file with the epartment of State: (If resigned, enter resigned)	
	GORDON, BRUCE H	21
	SHUMAKER, LOOP & KENDRICK	2020 (1.1.)
	101 E. Kennedy Blvd., Suite 2800, Tampa, FL 33602	
6. The name (if changed	and street address of the new registered agent (if changed) and /or registered office address	PII 4:
	J. Todd Timmerman	- 5.
	Shumaker, Loop & Kendrick, LLP	ഗ
	P.O. Box. NOY acceptable	
	101 E. Kennedy Blvd., Suite 2800, Tampa, FL 33602	
The street ac as changed v	ddress of its registered office and the street address of the business office of its registere will be identical.	d agent,
Such change authorized b	e was authorized by resolution duly adopted by its board of directors or by an officer so by the board, or the corporation has been notified in writing of the change.	
Ma	Explane of the Color of the Col	FO
	replaced in inficer of discension 5/5/2025  Printed or typed name and fills  yept the appointment as registered agent and agree to act in this capacity.  It is a comply with the provisions of all statutes relative to the proper and complete performent of amiliar with and accept the obligation of my position as registered agent. To share the registered office address, I hereby confirm that been notified in writing of this change.  Sharature of Registered Agent  That the provided name and title that the proper and complete performent to the proper and complete	ormance Or, if this that the
rr signing or		
र अधिपासि छ।		

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