M18000003993

| (Requestor's Name) |
|-----------------------------------------|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Account#: 120000000088

| Date:03/09/2022 |
|----------------------------------------------------------------|
| lame: Merritt Walker |
| Reference #: |
| Entity Name: HARDHAT WORKFORCE SOLUTIONS LLC |
| ☐ Articles of Incorporation/Authorization to Transact Business |
| Amendment |
| |
| Reinstatement |
| Conversion |
| ☐ Merger |
| ☐ Dissolution/Withdrawal |
| ☐ Fictitious Name |
| Other |
| |
| authorized Amount: \$25 |
| ignature: |



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

| Date:03/09/2022 |
|--------------------------------------------------------------|
| Name:Merritt Walker |
| Reference #: |
| Entity Name: HARDHAT WORKFORCE SOLUTIONS LLC |
| Articles of Incorporation/Authorization to Transact Business |
| Amendment |
| ✓ Change of Agent |
| Reinstatement |
| Conversion |
| ☐ Merger |
| ☐ Dissolution/Withdrawal |
| ☐ Fictitious Name |
| Other |
| |
| Authorized Amount: \$25 |
| Signature: |

F: 800.944.6607

F: +852.2682.9790

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

| 1302 Jefferson Road Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Greensboro, NC 27410 M18000003993 Document number |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Greensboro, NC 27410 M18000003993 Document number Dept. of State: |
| M18000003993 Document number Dept. of State: |
| Document number Dept. of State: |
| Document number Dept. of State: |
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| tate of Florida, it is hereby confirmed that after ered office and the business office of the registered apany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in bility company. |
| ontry company. |
| Robert E Hartman |
|) E |

the bulgations of my position as registered agent as provided for in Chapter 603, r.s. Or, it into accument is being flied to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent Asst. Secretary