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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301

P: 866.625.0838 F: 866.625.0839

COGENCYGLOBAL.COM

Account#: I20000000088

Date:	08/17/2022	
Name:	Merritt Walker	
Reference #:	1758390	
Entity Name:	ALUTIIQ INFORMATI	ON MANAGEMENT, LLC
☐ Article	es of Incorporation/Authorization t	o Transact Business
☐ Amen	dment	
✓ Chang	ge of Agent	
Reins	tatement	
☐ Conve	ersion	
☐ Merge	er	
☐ Dissol	lution/Withdrawal	
☐ Fictitio	ous Name	
Other		
Authorized A	mount: \$25	
Signature:	mur	

P: +852.2682.9633

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

(a)		(b)	
, ,	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	No Change	<u>N</u>	No Change
	May 18, 2020		M20000004578
	Date of filing/registration in Florida	4.	Document number
(a)	CORPORATION SERVICE COMPANY	•	
(,	Registered Agent and Registered Office shown on the reco	ords of the Florida De	rpt. of State:
	1201 HAYS STREET		
	1201111100111221		
	Registered Office Address (MUST BE FLORIDA STE	REET ADDRESS)	
		REET ADDRESS), FL_ 32301-25	2077 AUG
(b)	Registered Office Address (MUST BE FLORIDA STI	22201 20	G 17
(b)	Registered Office Address (MUST BE FLORIDA STE	_, FL_32301-2	
(b)	Registered Office Address (MUST BE FLORIDA STE	_, FL_32301-2	
(b)	Registered Office Address (MUST BE FLORIDA STI	_, FL_32301-2	SSE TO
(b)	TALLAHASSEE COGENCY GLOBAL INC. Enter name of NEW Registered Agent and/or NEW Registered 4. Suite 4	_, FL_32301-2	

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/s/ Melissa M Slinkard

Melissa M Slinkard

Signature of a member or authorized representative of a member

Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed 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.

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/s/ ⁻	1 11		IVIa	VV	111	