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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 : (614)573-3996 Fax Number

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LLC REGISTERED AGENT CHANGE SCANSTAT TECHNOLOGIES, LLC

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T. LEMIEUX

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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 submus the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. 8	Name of the limited liability company: ScanSTAT Tech	mologies, l				
2. (a)	(b)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	1750 FOUNDERS PKWY STE 130		1750 FOUNDERS PKWY STE 130			
	ALPHARETTA, GA 30009		ALPHARETTA. GA 30009 M23000004736			
	04/10/2023					
3.	Date of filing/registration in Florida	4.		Document number	<u>.</u>	
5 (0	<u>, </u>					
J. (u	Registered Agent and Registered Office shown on the records o	f the Florida	Dept. of State	:		
	REGISTERED AGENT SOLUTIONS, INC.				sa.	
	Registered Office Address (MUST BE FLORIDA STREET	'ADDRESS	2	. · · · · · · · · · · · · · · · · · · ·	, a (2)	
	2894 REMINGTON GREEN LN., STE, A					
	Tallahassee	, FL_32308				
		ــــــــــــــــــــــــــــــــــــــ	·		F. C.	
(h	1				工	
10	Enter name of NEW Registered Agent and/or NEW Registered Office address:				կ. ե 3	
	C T Corporation System		₍₂₎			
	NEW Registered Office Address:					
	1200 South Pine Island Road					
	Plantation, FI	33324				
If the	limited liability company is not organized under the la			rida ji is hereby confi	med that after	
the ch	nange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members	of the regis	stered office	and the business office that	e of the registered the change(s)	
hewi	ticles of organization or the operating agreement of the	e limited l	iability com	pany.	•	
Ma	neesle Agarwal	N	laneesh A		,	
	stress of ember or authorized representative of a member			Printed or typed name of si	•	
provi the ol to me	eby accept the appointment as registered agent and ag stons of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, f ed in writing of this change.	pree to act e perform ea for in (Thereby co	in this cape ance of my c hapter 603 annim that t	ucity. I further agree to hites, and I am Jamilio, F.S. Or, if this document limited liability con) comply with the ir with and accept ient is being filed ipuny has been	
By:	C.T. Corporation System		X			
Signa	ture of Registered Agent Denise Bell, Asst. Secretary					