P01000068774

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2121 HAY -7 PH 4: 37

O SIMMON :-

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. :	I2000000195					
REFERENCE :	798890 7994094					
AUTHORIZATION :						
COST LIMIT :	\$ 35.00					
ORDER DATE : May 7, 2021						
ORDER TIME : 1:03 PM						
ORDER NO. : 798890-005						
CUSTOMER NO: 7994094						
CHANGE OF AGENT						
NAME: CRAIG ELECTRONICS	TNC					
ordite EESCIRONICE						
PLEASE RETURN THE FOLLOWING AS PRO	OF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Alexxis Weiland	- EXT#					
I	EXAMINER:					

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: CRAIG ELECTRONICS INC. Name of Corporation				
DOCUMENT NUMBER: P01000068774				
The enclosed Statement of Change of Registered C	Office/Agent and fee are submitted for filing.			
Please return all correspondence concerning this m	natter to the following:			
Anna Feldman				
Name of Contact Person	-			
Nova Wildcat Shur-Line LLC				
Firm/Company	 			
324A Half Acre Road				
Address				
Cranbury, NJ 08512				
City/State and Zip Code				
annafeldman@worldandmain.ec	om			
E-mail address: (to be used for future annual re	eport notification)			
For further information concerning this matter, plea	ase call:			
Anna Feldman	at (609 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
Name of Contact Person	at (609) 860-9990 X 1147 Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the De	epartment of State.			
Mailing Address: Amendment Section	Street Address:			
	Amendment Section			
Division of Corporations P.O. Box 6327	Division of Corporations			
Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			
rananassec. 112 52514	Tallahassee, FL 32303			

CR2E045 (04/13)

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

statement of ch	provisions of sections 60% inge is submitted for a coi	rporation organ	nized under the laws o	f the State of _	Florida
	er to change its registered the corporation: Craig E		ered agent, or both, it	i the State of Fi	lorida.
2. The principal	office address: 1160 NW	/ 163rd Drive, M	liamiGardens, FL 3316	9-5816	
2. The principal	office address:	<u> </u>			
3. The mailing a	iddress (if different): 324	4A Half Acre Ro	ad, Cranbury NJ 08512	 !	
	poration/qualification: 07/				3774
5. The name and	I street address of the curr 1ment of State: (If resigne	ent registered a	gent and registered of		
	Michael Newman				4 5.
	1160 NW 163RD DRIVE				· 1
	MIAMI GARDENS FL 33	3169-5816			1
6. The name and (if changed):	street address of the new				PH 4
	Corporation Service Comp	pany			4: 37
	1201 Hays Street			<u>-</u> -	
	T-11-1	P.O. Boy	NOT acceptable	-	
	Tallahassee, FL 32301				
The street addre as changed will	ss of its registered office be identical.	and the street	address of the busines	ss office of its	registered agent.
Such change wa	s authorized by resolutio e board, or the corporation	n duly adopted on has been not	by its board of directified in writing of the	tors or by an o	fficer so
	Anglan		Jeffrey Ropers		
_	of an officer or director	<u></u>		yped name and title	
of my duties, and document is bein	the appointment as regist to comply with the provisi I I am familiar with and a 13 filed merely to reflect to been notified in writing o	ous of air siau accept the obli a change in the	d agree to act in this of tes relative to the pro- gation of my position registered office add	capacity, oper and comp as registered i dress, I hereby	lete performance agent. Or, if this confirm that the
- Juli	unda E Tolu		05/07/2021		
_	ature of Registered Agent	om, desiritym, _s feg Pr <u>epries</u> a		Date	
If signing on bel		da Robinson /ice President			
Ty	ped or Printed Name	 _			

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