Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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	REGISTERED AGENT CHANGE
Em	ail Address:
an	nual report mailings. Enter only one email address please.**
	fax Number : (888)706-7274 the email address for this business entity to be used for future nual report mailings. Enter only one email address please.**
	Fax Number : (888)706-7274
	Phone : (888) 705 - 7274
	Account Number : I20100000062
- , 	Account Name : REGISTERED AGENT SOLUTIONS INC
From:	
	Fax Number : (850)617-6380
	Division of Corporations
To:	

HIGHWINDS HOLDINGS, INC.

Certificate of Status	0
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COVER LETTER

TO:

Amendment Section Division of Corporations

_{ѕивјест:} Highw	rinds Holdings, Inc.	
Name of Corporation		
DOCUMENT NUMBER:	P02000096496	

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:

Mary Castillo	
Name of Contact Person	
Registered Agent Solutions, Inc.	
Firm/Company	
1701 Directors Blvd. Suite 300	
Address	
Austin, Texas 78744	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Mary Castillo at (888) 705-7274	
Name of Contact Person Area Code & Daytime Telephone!	Number

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

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.0502, 617.05 nge is submitted for a corporation orga r to change its registered office or regis	mized under the laws of the St	ate of Florida			
1. The name of t	the corporation: Highwinds Hooffice address: 2021 MCKINN 6, TX 75201	ldings, Inc.				
	ddress (if different):		000000000000000000000000000000000000000			
4. Date of incorp	poration/qualification: 9/6/2002	Document number: P	02000096496			
	street address of the current registered tment of State: (If resigned, enter resign	•	file with the			
	CORPORATION SE 1201 HAYS STREET	RVICE COMPA	ANY 2021			
	TALL	FL 32301	2021 JANI 2			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Registered Agent Solutions, Inc.						
	155 Office Plaza Dr.	Suite A				
		ox NOT acceptable FL 32301	PLATE			
The street addre	ess of its registered office and the stree be identical.	t address of the business offi	ce of its registered agent,			
Such change wa authorized by th	is authorized by resolution duly adopte the board, or the corporation has been n	ed by its board of directors or otified in writing of the chan	by an officer so ge.			
/s/ Sherri Ro	e of an officer or director	Sherri Russell	Authorized Person			
I hereby accept I further agree t of my duties, an document is beit corporation has	the appointment as registered agent a to comply with the provisions of all sta d l am familiar with and accept the ob ng filed merely to reflect a change in t been notified in writing of this chang	nd agree to act in this capaci tutes relative to the proper a digation of my position as req he registered office address, e.	ity nd complete performance gistered agent. Or, if this I hereby confirm that the			
Hock	augu H	01/21/2021				
_		Date				
-	half of an entity:					
	Assistant Secretary pped or Printed Name					
',	•	EE: \$35.00 * * *				
Mark Conference and the Conference of Department of Persons						

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