P03000083542

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| (Ac | ldress) | | | |
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| (Ad | idress) | | | |
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| (Ci | ty/State/Zip/Phon | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
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| Certified Copies | _ Certificates | s of Status | | |
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| Special Instructions to | Filing Officer: | | | |
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Office Use Only



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COVER LETTER

Amendment Section Division of Corporations

TO:

| Intertal: Inc | | |
|---|---|--|
| SUBJECT: Integtek, Inc Name of Corporation | | |
| DOCUMENT NUMBER: P03000083542 | | |
| The enclosed Statement of Change of Registered Of | fice/Agent and fee are submitted for filing. | |
| Please return all correspondence concerning this ma | tter to the following: | |
| Catherine D Vick | | |
| Name of Contact Person | | |
| Integtek, Inc | | |
| Firm/Company | | |
| 19523 Deer Lake Road | | |
| Address | | |
| Lutz, FL 33548-4246 | | |
| City/State and Zip Code | | |
| cathy.vick@integtek.com | | |
| E-mail address: (to be used for future annual rep | port notification) | |
| For further information concerning this matter, pleas | ee call: | |
| Catherine D Vick | at (813)546-6053 | |
| Name of Contact Person | at (813)546-6053 Area Code & Daytime Telephone Number | |
| Enclosed is a \$35.00 check made payable to the Dep | artment of State. | |
| Mailing Address: Amendment Section | Street Address: Amendment Section | |
| Division of Corporations P.O. Box 6327 | Division of Corporations The Centre of Tallahassee | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

| statement of cha | nge is submitted for a corpo | 2502, 617.0502, 607.1508, or 617.1508, Flooration organized under the laws of the Stat | e of Florida |
|--|---|---|--|
| | | fice or registered agent, or both, in the Stat | e of Florida. |
| 1. The name of | the corporation: Integtek, Inc | | |
| 2. The principal | office address: 19523 Deer L | Lake Road, Lutz, FL 33548-4246 | |
| 3. The mailing a | address (if different): P.O. B | OX 1438LUTZ, FL 33548-1438 | |
| | | Document number: P030 | 000083542 |
| | d street address of the current rtment of State: (If resigned, | nt registered agent and registered office on fi enter resigned) | ile with the |
| | CORPORATION SERVICE | COMPANY | |
| | 1201 HAYS STREET | | |
| | TALLAHASSEE, FL 32301 | | 2021 SECH |
| 6. The name and (if changed): | d street address of the new re | egistered agent (if changed) and /or registere | 2021 JUL 14 PM 12: SECRETE IN OF STA |
| | Catherine D Vick | | MS PR |
| | 19523 DEER LAKE ROAD | | D: 5 |
| | LUTZ, FL 33548-4246 | P.O. Box NOT acceptable | —— [F 36 |
| The street address changed will | ess of its registered office a be identical. | nd the street address of the business office | of its registered agent, |
| | | duly adopted by its board of directors or be has been notified in writing of the change | y an officer so |
| Caro | DU, | Catherine D Vick, Director | |
| Signatu | re of an officer or director | Printed or typed name | |
| I hereby accept I further agree of my duties, an document is bei corporation has | the appointment as registe to comply with the provision and I am familiar with and ac ing filed merely to reflect a s been notified in writing of | red agent and agree to act in this capacity ns of all statutes relative to the proper and ccept the obligation of my position as regi change in the registered office address, I this change. | l complete performance stered agent. Or, if this hereby confirm that the |
| 1) N >1/2 | 21 | July 9, 2021 | |
| Sig | nature of Registered Agent | Date | |
| If signing on be | half of an entity: | | |
| T | yped or Printed Name | | |
| | *** | FILING FEE: \$35.00 * * * | |

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