

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.

(((H22000415703 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page Doing so will generate another cover sheet.

	TC:	Division of Co Fax Number			2022 DE(
	From:				<u>[]</u>	د , ييب
52	I		: C T CORPORATION SYSTEM		2	
	/	Account Number	: FCA00000023	,	2.20	: 9 9
ï	-	Phone	: (954)208-0845		AH	(22.000)
AH		Fax Number	: (614)573-3996	-	æ	لي
_				-	دى	
12	**Enter the email address for this business entity to be used for future					
С Ц	annual report mailings. Enter only one email address please.**					
2022 DEC	Ema .'	il Address:				

REGISTERED AGENT CHANGE EVOLVEHR III, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

Corporate Filing Menu Electronic Filing Menu lelo

e î

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida , in order to change its registered office or registered agent, or both, in the State of Florida,

1. The name of the corporation: EVOLVEHR III, INC.

2. The principal office address: 235 3RD STREET SOUTH, SUITE 300

ST. PETERSBURG, FL 33701

The mailing address (if different): -

- 08/31/2006 P06000113173 4. Date of incorporation/qualification: Document number:
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enterresigned)

JENSEN, PAUL C 2001 16TH STREET NORTH 2022 DEC ST. PETERSBURG, FL 33704 6. The name and street address of the new registered agent (if changed) and /or registered office (ifchanged): AM 8: C T Corporation System 1200 South Pine Island Road ယ P.O. Box NOT acceptable Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board of the corporation has been notified in writing of the change.

Signature of an officer of ducctor

Eric Jensen - Attorney in Fact

Printed or typed name and title

Thereby accept the appointment as registered agent and agree to act in this capacity. I jurther 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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. Thereby confirm that the corporation has been notified in writing of this change.

Corporation System MJNU LU

12/08/2022

Date

If signing on behalf of an entity:

Christine Kelm-Asst. .Secretary

Typed or Printed Name

Signature of Registered Agent

* * * 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)

ĩο

By: