P10000005058

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COVER LETTER

	endment Section ision of Corporations
SUBJECT:	Strategic Innovation Services Inc.
	Name of Corporation
DOCUME	NT NUMBER: P10000005058
The enclose	d Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please retur	n all correspondence concerning this matter to the following:
	Dan Brigh
	Name of Contact Person
	Strategic Innovation Services Inc. Firm/Company
	243 Quigley Blvd, Ste. K.
	New Castle, DE, 19720 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
	_ man appropries (in the coop in the coop
For further	information concerning this matter, please call:
٠.	Dan Srigh at (786) 857-5696 Name of Contact Person Area Code & Daytime Telephone Number
	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** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

•	visions of sections 607.0502, 617.0502, 607:1508, or 617.1508, Florida Statutes, this is submitted for a corporation organized under the laws of the State of Florida
	change its registered office or registered agent, or both, in the State of Florida.
1. The name of the o	corporation: Strategic Innovation Services Inc.
2. The principal offi	4000 Durdy Avenue 2244 Minni Donah El 22420
3. The mailing addre	ess (if different): 243 Quigley Boulevard, Ste K, New Castle, DE 19720
4. Date of incorpora	tion/qualification: 01/19/2010 Document number: P10000005058
5. The name and stre	eet address of the current registered agent and registered office on file with the
NF	RAI SERVICES, INC
12	RAI SERVICES, INC 200 South Pine Island Road
Pla	est address of the new registered egent (if changed) and (or registered office
6. The name and str (if changed):	eet address of the new registered agent (if changed) and /or registered office
Inc	Corp Services, Inc.
17	888 67th Court North
Lo	P.O. Box NOT acceptable exahatchee, FL 33470
The street address of as changed will be	of its registered office and the street address of the business office of its registered agent, identical.
Such change was au authorized by the bo	uthorized by resolution duly adopted by its board of directors or by an officer so oard, or the corporation has been notified in writing of the change.
Signature of	an officer or director Gurmeet Batra Director Printed or typed name and title
I further agree to co	appointment as registered agent and agree to act in this capacity. omply with the provisions of all statutes relative to the proper and complete duties, and I am familiar with and accept the obligation of my position as registered ocymient is being filed merely to reflect a change in the registered office address, I the corporation has been notified in writing of this change.
	October 11, 2016
If signing on behalf	Fof Registered Agent Date Of an entity:
Kathy Shin on be	ehalf of InCorp Services, Inc.

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

Typed or Printed Name