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(Requestor's Name)					
(Address)					
(Ac	ddress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nar	me)			
(Document Number)					
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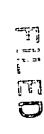
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115 N CALHOUN ST., STE. 4 TALLAHASSEE. FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	03/14/2019	
	Chris Vick	
	ne #: 1058043	
Entity Na	me:NGI	LATAM. CORP.
☐ Ar	ticles of Incorporation/Authoriza	ation to Transact Business
☐ Ar	nendment	
₽ Ch	nange of Agent	
☐ Re	einstatement	
□ Co	onversion	
	erger	
☐ Di	ssolution/Withdrawal	
☐ Fid	ctitious Name	
☐ Ot	her	
Authorize Signature	ed Amount: \$35	

F: 800.944.6607



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	03/14/2019	
Name:_	Chris Vick	_
Referen	ce #: 1058043	_
Entity N	ame:NGN LA	TAM. CORP.
ПА	articles of Incorporation/Authorization	to Transact Business
	mendment	
V C	Change of Agent	
□ R	Reinstatement	
☐ C	Conversion	
□ N	Merger	
	Dissolution/Withdrawal	
☐ F	ictitious Name	
	Other/	
Authoriz	zed Amount. \$35	
Signatui	re:	

F: 800,944,6607

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

statement of char	rovisions of sections 607.0, ige is submitted for a corpo to change its registered off	ration organizea	under the laws o	of the State of ,	Flor		-	
	of the corporation: NGN LATAM. CORP.							
	office address:							
	No Ch	anges						
3. The mailing ac	ddress (if different):							
4. Date of incorp	oration/qualification:	01/19/2010	_ Document nun	nber:F	P100000	05306		
	street address of the curren ment of State: (If resigned.		and registered o	ffice on file w	ith the			
	NS	CORPORATE S	ERVICES INC.					
	11	10 BRICKELL A	VE STE 310			~ >		
	Miami		FL	33131	250 250 250 250 250 250 250 250 250 250	2019 M.S.R	- নুন্	
6. The name and (if changed):	street address of the new re	gistered agent (il	Changed) and /o	r registered of	lice:	AR I 4 AM		
		COGENCY GLO	BAL INC.		1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	9:		
	115 No	th Calhoun Stre				$\frac{1}{\omega}$		
	Tallahasse	PO Box NOT accep ∋	Florida	32301				
The street address as changed will be	ss of its registered office ar	••			s register	red age	ent,	
Such change was authorized by the	s authorized by resolution of board, or the corporation	luly adopted by has been notifie	its board of direct d in writing of th	ctors or by an ne change.	officer so	o		
	ul Fuchs		Raul Fuchs		Directo	or	_	
I hereby accept t I further agree to performance of t agent. Or, if this	e of an officer or director he appointment as register o comply with the provision ny duties, and I am familia i document is being filed m hat the corporation has be	is of all statutes r with and accep erely to reflect a	ree to act in this relative to the pr of the obligation I change in the re	roper and con of my position egistered offic	iplete 1 as regis	stered s, I		
	/S/ Tim Mayville March 14, 2019							
Sign If signing on belt	ature of Registered Agent half of an entity:			Date				
Tim Mayville,	Assistant Secretary							

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