2/11/2020

Division of Corporations



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(((H200000478123)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC

Account Number : 110432003053

Phone : (561)694-8107

Fax Number : (561)694~1639

\*\*Bnter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email	Address:			

## REGISTERED AGENT CHANGE BRIGHTGAUGE SOFTWARE, INC.

	, , , , , ,		
Certificate of Status	0		
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Page Count	02		
Estimated Charge	\$35.00		

O SIMMONS

FEB 1 2 2020

## H20000047812

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

1. The name of	the corporation is: Brigh	itGauge Software	inc.			
2. The principal	_ <u></u>	202				
Coral Gable	s FL 33134			二声景	9	
3. The mailing	.> :	B				
Coral Gable	s FL 33134			::::	<u>=</u> _	E Person
4. Date of incor	poration/qualification:	2/23/2010	Document Number:_	P10000		4 [ ]
	d street address of the cu	rrent registered ag	ent and registered office	on file wit	h <del>tt</del> e	
Florida Depa	rtment of State:				ယ်	
	Geoffrey Willison 2121 Ponce de Leon B	lvd 530		<u></u>	o,	
	Coral Gables FL 33134	144 550		<del></del>		
6. The name an (if changed):	d street address of the ne	w registered agen	t (if changed) and /or reg	istered off	ice	
(II Changed).	Corporate Creations No	etwork Inc.				
	801 US Highway 1					
	(P.C North Palm Beach FL	). Box Not acceptable) 33408				
	ess of its registered officed will be identical.		address of the business	office of i	ts regi	sterec
Such change w	as authorized by resolu- ne board or the corporati	tion duly adopted on has been notifi	by its board of directored in writing of the change	rs or by a ge.	பா offic	cer so
		j	oseph Panholzer, Attorney-in-	-Fact		
(Signa	ture of an officer or director)		(Printed or Typed na	ime and title)	<del></del>	
I further agree performance of agent. Or, if th	the appointment as regis to comply with the pr my duties, and I am fami iis document is being file that the corporation has	ovisions of all si iliar with and accord ad merely to reflec	atutes relative to the p ept the obligation of my p et a change in the registe	proper and position as	registe	ered
			02/11/202			
	ture of Registered Agent)		(Date	<b>:</b> )		
If signing on be	half of an entity:					
Joseph Panholze (Type	er, Special Secretary ed or Printed Name)	<del></del>				
7	MAKE CHECKS MAIL TO: DIVISION OF C		orida Department of S O. Box 6327, Tallaha		32314	
801 US Highw	ations International Ind ay 1 each FL 33408	<b>:</b> .				

H20000047812

(561) 694-8107